I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Commissioner for Patents,
P.O. Box 1450
Alexandria, VA 22313-1450

On Dec. 16, 2003

By Michelle Nicely

3739

PATENT

Attorney Docket No.: A-2-6

OIPE JC105 DEC 2 2 2003 PATENT & TRADEMARK OFFICE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent of:

Philip E. Eggers

Application No.: 09/314,247

Filing Date: May 18, 1999

Title: SYSTEM FOR TREATING ARTICULAR CARTILAGE DEFECTS

Examiner: Lee Cohen

Art Unit: 3739

COMMUNICATION

RECEIVED
DEC 3 0 2003
TECHNOLOGY CENTER R3700

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The following information is being brought to the Examiner's attention.

I. LITIGATION ACTIVITY

Smith & Nephew litigation

On July 25, 2001, ArthroCare Corporation commenced an action in the United States District Court for the District of Delaware against Smith & Nephew, Inc. ("Smith & Nephew") for infringement of U.S. Patent Nos. 5,697,536 ("the '536 Patent"), 5,697,882 ("the '882 Patent") and 6,224,592 ("the '592 Patent"). That action was assigned Civil Action No. 01-504-SLR (the "*Smith & Nephew* litigation"). The *Smith & Nephew* litigation proceeded to trial commencing on April 30, 2003. On May 12, 2003, the jury returned a verdict in favor of ArthroCare on infringement and validity issues with respect to all three patents. A copy of the jury's verdict, dated May 12, 2003, is enclosed. Thereafter, on June 20, 2003, the Court entered judgment on the jury's verdict. A copy of the judgment is enclosed.

Numerous papers were filed with the Court during the *Smith & Nephew* litigation. The official docket kept by the clerk of the Delaware District Court, which is 43 pages long, is enclosed. The

files holding the documents corresponding to the docket entries on the official docket span approximately eight linear feet of shelving space. Applicant is enclosing herewith the following documents from the *Smith & Nephew* litigation which show Smith & Nephew's and Applicant's primary arguments relating to issues of validity and enforceability:

1. Smith & Nephew's Supplemental Responses to Plaintiff ArthroCare's Interrogatories Nos. 4 And 5, dated December 19, 2001;
2. Smith & Nephew's Supplemental Invalidity And Infringement Contentions, served March 29, 2002 [1];
3. Smith & Nephew's Supplemental Invalidity Contentions, served June 3, 2002;
4. Smith & Nephew's Supplemental Invalidity Contentions, served September 10, 2002;
5. Smith & Nephew's Supplemental Invalidity Contentions, served October 9, 2002;
6. ArthroCare's Validity Contentions, served October 15, 2002;
7. Memorandum Order Re: Claim Construction, filed April 9, 2003;
8. Smith & Nephew's Notice Pursuant To 35 U.S.C. § 282;
9. Trial Testimony Of Smith & Nephew's Expert Dr. Kim Manwaring on May 6, 2003;
10. Trial Testimony Of Smith & Nephew's Expert Dr. Kenneth Taylor on May 7 & 8, 2003;
11. Jury Verdict, dated May 12, 2003;
12. Judgment In A Civil Case, filed June 20, 2003;
13. Smith & Nephew's Opening Brief In Support Of Its Inequitable Conduct Case, filed June 9, 2003;
14. Smith & Nephew's Opening Brief In Support Of Its Rule 50(b) Motion For Judgment As A Matter Of Law, filed June 30, 2003;
15. ArthroCare's Corrected Answering Brief In Opposition To Smith & Nephew's Opening Brief In Support Of Its Inequitable Conduct Case, filed July 11, 2003[2];
16. ArthroCare's Answering Brief In Opposition To Smith & Nephew's Rule 50(b) Motion For Judgment As A Matter Of Law, filed July 30, 2003;
17. Smith & Nephew's Reply Brief In Support Of Its Rule 50(b) Motion For Judgment As A Matter Of Law, filed August 14, 2003.

---

1. Smith & Nephew marked its infringement contentions "Highly Confidential – Attorneys' Eyes Only" under the protective order. Accordingly, Applicant has secured redacted pages that omit Smith & Nephew's infringement contentions from this document.

2. Smith & Nephew's Reply Brief In Support Of Its Inequitable Conduct Case, dated July 24, 2003, was filed under seal by Smith & Nephew. If the Examiner requests a copy, Applicant will contact Smith & Nephew in an attempt to secure an agreement by which the brief can be disclosed.

In addition to the above-listed materials, there are numerous other papers that were filed with the Court or served in connection with the *Smith & Nephew* litigation that relate to invalidity or enforceability issues. These include, for example, the expert reports of Dr. S. Nahum Goldberg (ArthroCare's expert on infringement and validity), Dr. Kenneth Taylor (Smith & Nephew's expert on infringement and invalidity), Dr. Kim Manwaring (Smith & Nephew's expert on invalidity), Dr. Michael Choti (Smith & Nephew's expert on infringement and invalidity), Charles Van Horn (ArthroCare's expert on patent prosecution issues), and Ronald Panitch (Smith & Nephew's expert on patent prosecution issues). Smith & Nephew also served a paper purportedly prepared by Dr. Brian Skromme of Arizona State University related to the validity of the '882 patent. Moreover, the parties filed motions for summary judgment on issues pertaining to the validity of the patents-in-suit. The briefs in support of and opposition to these motions are listed as docket numbers 247, 248, 257, 258, 261, 262, 280, 283, 292, 298, 300, and 302 on the official docket that ArthroCare has enclosed. Smith & Nephew also produced a declaration from Eberhard Roos, the named inventor on U.S. Patent No. 4,116,198 and co-author of the Roos and Elsasser article ("Über ein Instrument zur leckstromfreien transurethralen Resektion"), both of which were references asserted in the Smith & Nephew litigation. There also are many trial exhibits. In addition, pre-trial depositions were taken of several witnesses regarding validity and enforceability issues, including depositions of Dr. Goldberg, Dr. Taylor, Dr. Manwaring, Dr. Choti, Mr. Van Horn, and Mr. Panitch. A list of the depositions taken in the *Smith & Nephew* litigation is set forth below:

1. John Tighe, taken September 18, 2002 and November 8, 2002 (ArthroCare employee, fact witness);
2. Diane DeLucia, taken September 19, 2002 (Smith & Nephew employee, fact witness);
3. John Raffle, taken September 19, 2002 and November 11, 2002 (ArthroCare employee and patent attorney, fact witness);
4. James Heslin, taken September 24, 2002 (patent attorney, fact witness);
5. Fernando Sanchez, taken September 24, 2002 (ArthroCare employee, fact witness);
6. Duane Marion, taken September 28, 2002 (former Smith & Nephew employee, fact witness);
7. John Graf, taken October 1, 2002 (Smith & Nephew employee, fact witness);
8. Hira Tahpliyal, taken October 1, 2003 and November 14, 2002 (co-inventor of patents-in-suit, fact witness);
9. Jim Pacek, taken October 3, 2002 and November 7, 2002 (ArthroCare employee, fact witness);
10. John Konsin, taken October 3, 2002 (Smith & Nephew employee, fact witness);
11. Jean Woloszko, taken October 3, 2002 (ArthroCare employee, fact witness);

12. Andrew Eggers, taken October 4, 2002 (employee of Eggers & Associates (owned by Philip E. Eggers, co-inventor of patents-in-suit), fact witness);
13. Bruce Prothro, taken October 4, 2002 (ArthroCare employee, fact witness);
14. Kara Weldon, taken October 5, 2002 (current or former Smith & Nephew employee, fact witness);
15. David Balford, taken October 5, 2002 (Smith & Nephew employee, fact witness);
16. Allen Weinstein, taken October 8, 2002 (ArthroCare employee, fact witness);
17. Christine Hanni, taken October 10, 2002 (former ArthroCare employee, fact witness);
18. Linda Guthrie, taken October 11, 2002 (Smith & Nephew employee, fact witness);
19. Michael Baker, taken October 11, 2002 (ArthroCare CEO, fact witness);
20. Kate Knudsen, taken October 11, 2002 and November 7, 2002 (Smith & Nephew employee, fact witness);
21. Sally Maher, taken October 11, 2002 (Smith & Nephew employee, fact witness);
22. Ron Sparks, taken October 11, 2002 (Smith & Nephew CEO, fact witness);
23. Philip E. Eggers, taken October 15 and 29, 2002, November 13, 2002, and April 30, 2003 (co-inventor of patents-in-suit, fact witness);
24. Tom Ross, taken October 15, 2002 (current or former employee of Oratec Interventions, Inc. (acquired by Smith & Nephew), fact witness);
25. Jack Cordes, taken October 15, 2002 (former employee of Eggers & Associates, fact witness);
26. Michael Long, taken October 29, 2002 (former Smith & Nephew employee, fact witness);
27. Joan McCreary, taken October 30, 2002 (Smith & Nephew employee, fact witness);
28. Todd Plevinsky, taken October 31, 2002 (former Smith & Nephew employee, fact witness);
29. Karen Drucker, taken November 1 and 14, 2002 (Smith & Nephew employee, fact witness);
30. Allen Gannon, taken November 1, 2002 (Smith & Nephew employee, fact witness);
31. Jim Pacek, taken November 7, 2002 (ArthroCare employee, fact witness);
32. Tim Crabtree, taken November 7, 2002 (former Smith & Nephew employee, fact witness);
33. John Konsin, taken November 7, 2002 (Smith & Nephew employee, fact witness);
34. Jason Krieser, taken November 13, 2003 (Smith & Nephew employee, fact witness);
35. Dr. Kim Manwaring, taken March 20, 2003 (Smith & Nephew expert witness);
36. Dr. Eliot Leitman, taken March 25, 2003 (ArthroCare expert witness);
37. Dr. Kenneth Taylor, taken March 27 and 28, 2003 (Smith & Nephew expert witness);
38. Dr. S. Nahum Goldberg, taken March 27 and 28, 2003 (ArthroCare expert witness);

39. Ronald Panitch, taken March 28, 2003 (Smith & Nephew expert witness);
40. Dr. Michael Choti, taken March 30, 2003 (Smith & Nephew expert witness);
41. Charles Van Horn, taken April 3, 2003 (ArthroCare expert witness);
42. Creighton Hoffman, taken April 4, 2003 (ArthroCare expert witness);
43. Brian Napper, taken April 17, 2003 (Smith & Nephew expert witness);
44. Warren Heim, taken April 22, 2003 (consultant to Smith & Nephew, fact witness).

Smith & Nephew designated many of the materials from the *Smith & Nephew* litigation as confidential pursuant to the protective order in that case. Without admitting the materiality or relevance of the foregoing materials, Applicant will submit any or all of the foregoing materials to the Examiner for consideration or, if the Examiner requests materials that have been filed under seal or designated confidential pursuant to the protective order, Applicant will contact Smith & Nephew in an attempt to secure an agreement by which such materials can be disclosed.

II. REEXAMINATION

A. The '536 Patent

On December 23, 1999, an *Ex Parte* Reexamination Request ("Request") for the '536 Patent was filed with the PTO. Applicant has enclosed a copy of the file history for the '536 Reexamination with this Information Disclosure Statement. The Request sought reexamination of claims 1-3, 14, 16, 22, 27, 30, 33, 38, 41-48, 55, 57, 60, and 63 of the '536 Patent in light of U.S. Patent 4,116,198 ("the Roos '198"). The PTO granted the Request on October 27, 2000.

On November 15, 2002, the PTO mailed an Office Action. The Office Action is divided into two sections. Section I sets forth the conclusion of the examiner and a board of primary examiners that "the Roos '198 does not anticipate or render obvious any of the independent claims of record." *See* November 15, 2002 Office Action at 3. Section II contains a rejection of claims 1-64 of the '536 Patent as anticipated under 35 U.S.C. § 102(b) and obvious under 35 U.S.C. § 103 in light of certain references identified in an Information Disclosure Statement filed by Applicant on June 19, 2002. On December 19, 2002, Applicant submitted a Response to the Office Action.

On March 14, 2003, the PTO issued a Notice of Intent to Issue *Ex Parte* Reexamination Certificate ("NIRC"). The NIRC states that "the examiner of record concurs with the arguments presented

by patent Applicant on paper number 15. Accordingly, it is concluded that claims 1-64 are allowable over the prior art of record." *See* NIRC at 2. A Reexamination Certificate issued on June 10, 2003.

Additionally, on April 9, 2003, another *Ex Parte* Reexamination Request for the '536 Patent was filed with the PTO. The Request sought reexamination of claims 1, 2, 5, 9, 14, 15, 25, 26, 28, 30-33, 36, 38, 40, 42-47, 49, 53, 55, 56, 58, 59, 61, and 63 of the '536 Patent in light of the Roos '198; Elasser aad Roos, "Uber ein Instrument zur leckstromfreien transurethralen resection,"Medizinal-Markt/Acto Medicotechnica, Vol. 24, No. 4/1976, pp. 129-134 ("the Elasser and Roos article"); U.S. Patent Nos. 4,805,616; 4,674,499; 4,381,007; 5,217,459; and 5,007,908. The PTO granted the Request on June 30, 2003. It has been assigned Reexamination No. 90/006,597.

B. The '882 Patent

On April 18, 2003, an *Ex Parte* Reexamination Request for the '882 Patent was filed with the PTO. The Request sought reexamination of claims 1, 13, 17, 18, 24, 26, 28, 29, 48 and 54 of the '882 Patent in light of U.S. Patent Nos. 5,122,138; 5,007,908; and Slager et al., "Vaporization Of Atherosclerotic Plaques By Spark Erosion," JACC Vol. 5, No. 6, June 1985:1382-6 ("the Slager Article"). The PTO granted the Request on July 1, 2003. It has been assigned Reexamination No. 90/006,607.

C. The '592 Patent

On April 21, 2003, an *Ex Parte* Reexamination Request for the '592 Patent was filed with the PTO. The Request sought reexamination of claims 1, 3, 4, 9, 11, 21, 23, 26, 27, 30, 32 and 42 of the '592 Patent in light of the Roos '198; the Elasser and Roos article; U.S. Pat. Nos. 4,381,007 to Doss; and the Slager Article. The PTO granted the Request on July 7, 2003. It has been assigned Reexamination No. 90/006,611.

Should the Examiner desire copies of any of the documents filed in connection with the above reexaminations Applicant will submit them upon a request to do so in writing from the Examiner.

III. CO-PENDING PATENT APPLICATIONS

The following is a list of co-pending applications.

Application No.	Filing Date
09/293,231	16-Apr-1999
09/314,247	18-May-1999
09/338,842	23-Jun-1999
09/347,390	06-Jul-1999
09/354,835	16-Jul-1999
09/360,075	23-Jul-1999
09/372,454	11-Aug-1999
09/457,201	06-Dec-1999
09/501,327	09-Feb-2000
09/512,742	24-Feb-2000
09/539,147	30-Mar-2000
09/562,496	01-May-2000
09/562,650	01-May-2000
09/586,295	02-Jun-2000
09/679,394	03-Oct-2000
09/708,962	08-Nov-2000
09/709,035	08-Nov-2000
09/735,426	12-Dec-2000
09/747,311	20-Dec-2000
09/758,403	10-Jan-2001
09/771,299	25-Jan-2001
09/780,745	09-Feb-2001
09/791,504	22-Feb-2001
09/796,094	28-Feb-2001
09/836,940	17-Apr-2001
09/839,427	20-Apr-2001
09/845,034	27-Apr-2001
09/848,843	03-May-2001
09/963,736	26-Sep-2001
10/057,412	25-Jan-2002
10/072,599	05-Feb-2002
10/082,017	20-Feb-2002
10/097,763	13-Mar-2002
10/119,925	09-Apr-2002
10/135,478	30-Apr-2002
10/139,117	03-May-2002
10/174,266	18-Jun-2002
10/175,472	18-Jun-2002
10/175,555	18-Jun-2002
10/187,733	27-Jun-2002

Application No.	Filing Date
10/261,969	30-Sep-2002
10/264,308	02-Oct-2002
10/288,227	04-Nov-2002
10/290,930	07-Nov-2002
10/291,213	08-Nov-2002
10/339,470	09-Jan-2003
10/367,608	13-Feb-2003
10/372,591	21-Feb-2003
10/374,411	25-Feb-2003
10/384,050	05-Mar-2003
10/389,159	13-Mar-2003
10/621,839	16-Jul-2003
10/437,260	13-May-2003
10/402,728	28-Mar-2003
10/392,529	20-Mar-2003
10/389,159	14-Mar-2003
10/613,609	02-Jul-2003
10/435,825	12-May-2003
10/613,115	03-Jul-2003
10/621,839	16-Jul-2003
10/661,118	12-Sep-2003
10/656,597	05-Sep-2003
10/682,600	09-Oct-2003
10/713,643	13-Nov-2003

Respectfully submitted,

Richard R. Batt
Reg. No. 43,485

ArthroCare Corporation
680 Vaqueros Avenue
Sunnyvale, California 94085-3523
(408) 736-0224

Docket as of July 31, 2003 8:03 pm Web PACER (v2.4)

U.S. District Court

U. S. District Court of Delaware (Wilmington)

CIVIL DOCKET FOR CASE #: 01-CV-504

ArthroCare Corp. v. Smith & Nephew Inc., et al

Filed: 07/25/01
Assigned to: Judge Sue L. Robinson
Jury demand: Both
Demand: $0,000
Nature of Suit: 830
Lead Docket: None
Jurisdiction: Federal Question
Dkt # in USDC/N.D.CA : is C98-00609
Cause: 35:271 Patent Infringement

ARTHROCARE CORPORATION plaintiff	Jack B. Blumenfeld [COR LD NTC] Morris, Nichols, Arsht & Tunnell 1201 North Market Street P.O. Box 1347 Wilmington, DE 19899 (302) 658-9200
v.	
SMITH & NEPHEW INC. defendant	William J. Marsden, Jr. [COR LD NTC] Fish & Richardson, P.C. 919 N. Market Street, Suite 1100 P.O. Box 1114 Wilmington, DE 19899-1114 (302) 652-5070
ETHICON, INC respondent	Steven J. Balick [COR LD NTC] Ashby & Geddes 222 Delaware Avenue P.O. Box 1150 Wilmington, DE 19899 (302) 654-1888

=======================

SMITH & NEPHEW INC. counter-claimant	William J. Marsden, Jr. [COR LD NTC] Fish & Richardson, P.C. 919 N. Market Street, Suite 1100 P.O. Box 1114 Wilmington, DE 19899-1114 (302) 652-5070
v.	
ARTHROCARE CORPORATION counter-defendant	Jack B. Blumenfeld [COR LD NTC] Morris, Nichols, Arsht & Tunnell 1201 North Market Street P.O. Box 1347 Wilmington, DE 19899 (302) 658-9200

========================

SMITH & NEPHEW INC. counter-claimant	William J. Marsden, Jr. [COR LD NTC] Fish & Richardson, P.C. 919 N. Market Street, Suite 1100 P.O. Box 1114 Wilmington, DE 19899-1114 (302) 652-5070
v.	
ARTHROCARE CORPORATION counter-defendant	Jack B. Blumenfeld [COR LD NTC] Morris, Nichols, Arsht & Tunnell 1201 North Market Street P.O. Box 1347 Wilmington, DE 19899 (302) 658-9200

DOCKET PROCEEDINGS

DATE # DOCKET ENTRY

7/25/01	1	COMPLAINT filed; Mag consent notice to pltf. FILING FEE $ 150.00 RECEIPT # 130905 (rc) [Entry date 07/26/01]
7/25/01	--	DEMAND for jury trial by ArthroCare Corp. (rc) [Entry date 07/26/01]
7/25/01	--	SUMMONS(ES) issued for Smith & Nephew Inc. (rc) [Entry date 07/26/01]
7/25/01	2	Report to Commissioner of Patents and Trademarks. Exit original. Re: 5,697,536; 5,697,882, 6,224,592 B1 (rc) [Entry date 07/26/01]
7/25/01	3	RETURN OF SERVICE executed as to Smith & Nephew Inc. 7/25/01 Answer due on 8/14/01 for Smith & Nephew Inc. (rc) [Entry date 07/26/01]
8/1/01	4	CASE assigned to Judge Sue L. Robinson . Notice to all parties. (rb)
8/15/01	5	STIPULATION with proposed order re extending time for deft's to resp. to complaint (lj)
8/17/01	--	So Ordered granting [5-1] stipulation reset Answer deadline to 9/13/01 for Smith & Nephew Inc. (signed by Judge Sue L. Robinson) Notice to all parties. (rd) [Entry date 08/20/01]
9/5/01	6	MOTION by ArthroCare Corp. with Proposed Order for Matthew D. Powers and Jared Bobrow of Weil to Appear Pro Hac Vice (rd)
9/7/01	--	So Ordered granting [6-1] motion for Matthew D. Powers and Jared Bobrow of Weil to Appear Pro Hac Vice (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
9/10/01	7	MOTION by ArthroCare Corp. to enjoin Second-filed Duplicative litigation Answer Brief due 9/24/01 re: [7-1] motion (rd) [Entry date 09/12/01]
9/10/01	8	Opening Brief Filed by ArthroCare Corp. [7-1] motion to enjoin Second-filed Duplicative litigation (rd) [Entry date 09/12/01]
9/12/01	9	Letter to Clerk from K. J. Louden enclosing Exhibit F to Pltf.'s opening brief in support of motion to enjoin filed on 9/10/01. (rd) [Entry date 09/14/01]
9/13/01	10	ANSWER to complaint and COUNTERCLAIM by Smith & Nephew Inc. (Attorney); jury demand against ArthroCare Corp. (rd) [Entry date 09/14/01]
9/13/01	11	MOTION by Smith & Nephew Inc. to Change Venue Pursuant to 28 U.S.C. Section 1404(a) Answer Brief due 9/27/01 re: [11-1] motion (rd) [Entry date 09/14/01]
9/13/01	12	Opening Brief Filed by Smith & Nephew Inc. [11-1] motion to Change Venue Pursuant to 28 U.S.C. Section 1404(a) (rd) [Entry date 09/14/01]

9/13/01	13	Declaration of Keith A. Walter, Jr. in support of DI 11. (rd) [Entry date 09/14/01]
9/13/01	14	Declaration of Joel Petrow, Esq. in support of DI 11. (rd) [Entry date 09/14/01]
9/13/01	15	Notice of Deficiency from the court to defendant Smith & Nephew Inc. re no original signature on DI 14. (rd) [Entry date 09/14/01]
9/17/01	16	CERTIFICATE OF SERVICE by ArthroCare Corp. re (1) 1st set of req. for prod. of doc. and things and (2) 1st set of interrog. (rd) [Entry date 09/20/01]
9/20/01	17	Declaration of Joel Petrow, Esq. in support of Deft.'s Motion to Transfer Venue. (rd) [Entry date 09/21/01]
9/24/01	19	Answer Brief Filed by Smith & Nephew Inc. [7-1] motion to enjoin Second-filed Duplicative litigation - Reply Brief due 10/1/01 (rd) [Entry date 09/26/01]
9/25/01	18	ORDER, set Tele-Scheduling Conference for 8:30 10/30/01 (signed by Judge Sue L. Robinson) copies to: cnsl. (rd) [Entry date 09/26/01]
9/26/01	20	ANSWER by ArthroCare Corp. to [10-2] counter claim (rd) [Entry date 09/28/01]
9/27/01	21	STIPULATION to extend time for pltf. to answer deft.'s motion to transfer and to file reply brief to its motion to enjoin; with proposed order (rd) [Entry date 09/28/01]
9/28/01	--	So Ordered granting [21-1] stipulation reset Answer Brief Deadline to 10/3/01 re: [11-1] motion to Change Venue Pursuant to 28 U.S.C. Section 1404(a), and reset Reply Brief Deadline to 10/3/01 re: [7-1] motion to enjoin Second-filed Duplicative litigation (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
10/1/01	22	Letter to Judge Robinson from W. Marsden, Jr. advising Court that deft. is withdrawing its motion to transfer, (DI #11), based on recent developments in parellel litigation in California. (rd) [Entry date 10/15/01]
10/1/01	--	WITHDRAWAL of [11-1] motion to Change Venue Pursuant to 28 U.S.C. Section 1404(a) per DI 22. (rd) [Entry date 10/15/01]
10/12/01	23	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re (1) 1st set of interrog. (nos. 1-14) and (2) 1st req. for prod. of doc. and things (rd) [Entry date 10/16/01]
10/15/01	24	STIPULATION re extension of time for filing resp. to discovery requestes; with proposed order (rd) [Entry date 10/16/01]
10/17/01	--	So Ordered granting [24-1] stipulation re extension of time for responses to discovery requests. (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
10/26/01	25	CERTIFICATE OF SERVICE by ArthroCare Corp. re Initial

		Disclosures (rd)
10/26/01	26	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re Initial Disclosures (rd)
10/29/01	27	Letter to Judge Robinson from J. Blumenfeld enclosing proposed sched. order for discussion at telecnf. on 10/30/01. (rd)
10/30/01	--	Scheduling conference held via telecnf.; Judge Robinson presiding; no crt. rptr. present. (rd)
10/30/01	28	MOTION by Smith & Nephew Inc. with Proposed Order for Kurtis D. MacFerrin to Appear Pro Hac Vice (rd)
10/31/01	--	So Ordered granting [28-1] motion for Kurtis D. MacFerrin to Appear Pro Hac Vice (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
11/9/01	29	Letter to Judge Robinson from J. Blumenfeld enclosing proposed scheduling order (rd) [Entry date 11/13/01]
11/9/01	30	Proposed Scheduling Order filed by ArthroCare Corp. (rd) [Entry date 11/13/01]
11/14/01	--	So Ordered [30-1] proposed order set Scheduling Order Deadlines: joining of parties, amended pleadings on 3/8/02 Discovery deadline on 11/22/02 Deadline for filing dispositive motions by 12/20/02, answering briefs due 1/31/03, reply briefs due 2/14/03; Pretrial conference by 4:30 4/15/03; Jury Trial Date Deadline 9:30 4/28/03, set In-person Discovery Conference for 4:30 3/5/02, and set Motion Filing deadline to 4/1/03 for motions in limine; responses due 4/8/03, set Notice of Compliance deadline to 12/20/02 for filing of Joint Claim Construction Statement; answering briefs due 1/31/03 matter referred to Mag. Judge Thynge for exploring settlement possibility; see order for complete details. (signed by Judge Sue L. Robinson) Notice to all parties. (rd) [Entry date 11/16/01]
11/15/01	32	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re resp. to 1st set of interrog. (nos. 1-7) and resp. to 1st set of req. for prod. of doc. (nos. 1-54). (rd) [Entry date 11/21/01]
11/21/01	31	MOTION by Smith & Nephew Inc. with Proposed Order for Mark J. Hebert to Appear Pro Hac Vice (rd)
11/26/01	--	So Ordered granting [31-1] motion for Mark J. Hebert to Appear Pro Hac Vice (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
11/26/01	33	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re (1) 2nd req. for prod. of doc. an things (nos. 94-94); and (2) 2nd set of interrog. (nos. 15-16). (rd) [Entry date 11/27/01]
11/30/01	34	MOTION by ArthroCare Corp. with Proposed Order for Perry Clark to Appear Pro Hac Vice (rd)
12/3/01	--	So Ordered granting [34-1] motion for Perry Clark to

		Appear Pro Hac Vice (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
12/20/01	35	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re Suppl. resp. to pltf.'s interrog. (nos. 4 & 5). (rd)
12/27/01	36	CERTIFICATE OF SERVICE by ArthroCare Corp. re (1) resp. and obj. to deft.'s 2nd set of req. for prod. of doc. and things (nos. 94-95); and (2) obj. and resp. to deft.'s 2nd set of interrog. (nos. 15-16). (rd) [Entry date 12/28/01]
2/19/02	--	Deadline updated; set Telephone Conference for 3:00 2/26/02 (rd)
2/21/02	--	Deadline updated; reset Telephone Conference for 10:00 2/28/02 re Protective Order (rd)
2/26/02	37	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re (1) 3rd set of interrog. (no. 17 and 18); and (2) 3rd req. for prod. of doc. and things (nos. 96-97). (rd)
2/27/02	38	Letter to Judge Robinson from K. Walter, Jr. enclosing proposed protective order for telecnf. (rd) [Entry date 02/28/02]
2/27/02	39	Proposed PROTECTIVE Order filed by Smith & Nephew Inc. (rd) [Entry date 02/28/02]
2/28/02	--	Tele-conference held re protective order; Judge Robinson presiding; crt. rptr. B. Gaffigan present. (rd)
2/28/02	42	Steno Notes for 2/28/02 telecnf.; Judge Robinson presiding; crt. rptr. B. Gaffigan present. (rd) [Entry date 03/01/02]
3/1/02	40	STIPULATED PROTECTIVE ORDER; with proposed order (rd)
3/1/02	41	TRANSCRIPT filed [0-0] telephone conference for dates of 2/28/02; Judge Robinson presiding; crt. rptr. B. Gaffigan present. (rd)
3/4/02	--	So Ordered granting [40-1] stipulated Protective Order (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
3/5/02	43	Letter to Judge Robinson from J. Blumenfeld listing items to be raised at discovery status conf. (rd)
3/5/02	44	Letter to Judge Robinson from W. Marsden, Jr. listing proposed agenda for discovery issues to be addressed at disc. status conf. (rd)
3/5/02	--	Discovery hearing held in person; Judge Robinson presiding; crt. rptr. K. Maurer present. (rd) [Entry date 03/06/02]
3/8/02	45	MOTION by Smith & Nephew Inc. with Proposed Order for Leave to File Amended Answer & Counterclaim Answer Brief due 3/22/02 re: [45-1] motion (rd) [Entry date 03/11/02]
3/8/02	46	Opening Brief Filed by Smith & Nephew Inc. [45-1] motion for Leave to File Amended Answer & Counterclaim (rd) [Entry date 03/11/02]

3/8/02	47	Letter to Judge Robinson from W. Marsden responding to Court's invitation at the 3/5/02 disc. conf. to provide authority supporting Smith & Nephew's patent misuse defense and discovery sought to develop additional facts to support that defense. (rd) [Entry date 03/11/02]
3/8/02	48	Letter to Judge Robinson from J. Blumenfeld re Smith & Nephew's interrog. nos. 15 and 16, which seek pltf.'s contentions re correctness of Judge Orrick's prelim. inj. decision. (rd) [Entry date 03/11/02]
3/11/02	49	TRANSCRIPT filed [0-0] discovery hearing for dates of 3/5/02; Judge Robinson presiding; crt. rptr. K. Maurer present. (rd)
3/11/02	50	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re 4th set of interrog. to pltf. (nos. 19-23). (rd)
3/13/02	51	Steno Notes for 3/5/02 re Discovery Conference; Judge Robinson presiding; crt. rptr. K. Maurer present. (rd)
3/13/02	52	Letter to Judge Robinson from J. Blumenfeld responding to deft.'s letter of 3/8/02 re party asserting a patent after denial of its prel. injun. motion. (rd)
3/21/02	53	ORDER denying [47-1] denying [48-1] requests that the court order pltf. to answer interrog. numbered 15 and 16 for reasons stated in this order (signed by Judge Sue L. Robinson) copies to: cnsl. (rd)
3/22/02	54	STIPULATION to extend time for pltf. to file answering brief and for deft. to file reply brief to DI#45; with proposed order (rd) [Entry date 03/26/02]
3/25/02	55	Answer Brief Filed by ArthroCare Corp. [45-1] motion for Leave to File Amended Answer & Counterclaim - Reply Brief due 4/1/02 (rd) [Entry date 03/26/02]
3/26/02	56	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re (1) suppl. resp. to 1st set of interrog. (nos. 2 & 6); and (2) 1st suppl. Rule 26(a)(1) Initial Disclosure. (rd)
3/27/02	--	So Ordered granting [54-1] stipulation reset Answer Brief Deadline to 3/25/02 re: [45-1] motion for Leave to File Amended Answer & Counterclaim, reset Reply Brief Deadline to 4/2/02 re: [45-1] motion for Leave to File Amended Answer & Counterclaim (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
3/27/02	57	NOTICE by ArthroCare Corp. to take deposition of Smith & Nephew, Inc. on 4/11/02 (rd) [Entry date 04/03/02]
3/28/02	58	CERTIFICATE OF SERVICE by ArthroCare Corp. re (1) resp. and obj. to 3rd set of req. for prod. of doc. and things (nos. 96-97); and Obj. and resp. to 3rd set of interrog. (nos. 17-18). (rd) [Entry date 04/03/02]
3/28/02	--	Return of discovery filed by Pltf. with copy of Local Rule

		5.4; only a ntc. of discovery should be filed with the court in this action. (rd) [Entry date 04/03/02]
3/29/02	59	STIPULATION to extend time for deft. to file reply brief to motion to amd. (DI#45); with proposed order (rd) [Entry date 04/03/02]
4/1/02	60	SEALED Letter to Judge Robinson from K. Walter, Jr. (rd) [Entry date 04/03/02]
4/3/02	--	So Ordered granting [59-1] stipulation rest Reply Brief Deadline to 4/9/02 re: [45-1] motion for Leave to File Amended Answer & Counterclaim (signed by Judge Sue L. Robinson) Notice to all parties. (rd) [Entry date 04/04/02]
4/3/02	61	SEALED Letter to Judge Robinson from J. Blumenfeld. (rd) [Entry date 04/05/02]
4/4/02	62	MOTION by Smith & Nephew Inc. with Proposed Order for Reargument of [53-1] order Answer Brief due 4/18/02 re: [62-1] motion (rd) [Entry date 04/05/02]
4/5/02	63	Declaration of Keith A. Walter in support of DI#62. (rd)
4/9/02	--	Deadline updated; set Telephone Conference for 4:30 4/10/02 (rd)
4/9/02	64	CERTIFICATE OF SERVICE by ArthroCare Corp. re Obj. and Resp. to 4th set of interrog. (nos. 19-23). (rd)
4/9/02	65	Reply Brief Filed by Smith & Nephew Inc. [45-1] motion for Leave to File Amended Answer & Counterclaim (rd) [Entry date 04/10/02]
4/9/02	66	SEALED Letter to Judge Robinson from W. Marsden, Jr. (rd) [Entry date 04/10/02]
4/10/02	--	Tele-conference held; Judge Robinson presiding; crt. rptr. B. Gaffigan present; re DI#60 and 61. (rd) [Entry date 04/11/02]
4/11/02	67	Steno Notes for 4/10/02; Judge Robinson presiding; crt. rptr. B. Gaffigan. (rd)
4/11/02	68	TRANSCRIPT filed [0-0] telephone conference for dates of 4/10/02; Judge Robinson presiding; crt. rptr. B. Gaffigan present. (rd) [Entry date 04/15/02]
4/16/02	69	STIPULATION to extend time for pltf. to respond to DI#62; with proposed order (rd) [Entry date 04/17/02]
4/16/02	70	Objections by Smith & Nephew Inc. to [57-1] deposition notice (rd) [Entry date 04/17/02]
4/18/02	--	So Ordered granting [69-1] stipulation reset Answer Brief Deadline to 4/26/02 re: [62-1] motion for Reargument of [53-1] order (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
4/24/02	71	NOTICE by Smith & Nephew Inc. to take deposition of John

		R. Tighe on 5/13/02 (rd) [Entry date 04/25/02]
4/24/02	72	NOTICE by Smith & Nephew Inc. to take deposition of Christine Hanni on 5/14/02 (rd) [Entry date 04/25/02]
4/24/02	73	NOTICE by Smith & Nephew Inc. to take deposition of John Raffle on 5/8/02 (rd) [Entry date 04/25/02]
4/24/02	74	NOTICE by Smith & Nephew Inc. to take deposition of Hira V. Thapliyal on 5/6/02 (rd) [Entry date 04/25/02]
4/24/02	75	NOTICE by Smith & Nephew Inc. to take deposition of Michael A. Baker on 5/10/02 (rd) [Entry date 04/25/02]
4/26/02	76	Answer Brief Filed by ArthroCare Corp. [62-1] motion for Reargument of [53-1] order - Reply Brief due 5/3/02 (rd) [Entry date 04/29/02]
5/1/02	77	NOTICE by Smith & Nephew Inc. to take deposition of Jack C. Cordes on 5/20/02 (rd) [Entry date 05/02/02]
5/1/02	78	NOTICE by Smith & Nephew Inc. to take deposition of Philip E. Eggers on 5/21/02 (rd) [Entry date 05/02/02]
5/1/02	79	NOTICE by Smith & Nephew Inc. to take deposition of James M. Heslin on 5/16/02 (rd) [Entry date 05/02/02]
5/1/02	80	NOTICE by Smith & Nephew Inc. to take deposition of Stryker Corp. on 5/21/02 (rd) [Entry date 05/02/02]
5/1/02	81	NOTICE by Smith & Nephew Inc. to take deposition of Ethicon, Inc. on 5/20/02 (rd) [Entry date 05/02/02]
5/1/02	82	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re Subpoena to Custodian of Records, Townsend & Townsend. (rd) [Entry date 05/02/02]
5/1/02	83	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re Subpoena for Custodian of Records, Eggers & Associates, Inc. (rd) [Entry date 05/02/02]
5/1/02	84	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re Subpoena to Custodian of Records, Cordes Engineering, Inc. (rd) [Entry date 05/02/02]
5/2/02	85	Letter to Judge Robinson from K. Walter, Jr. attaching copy of letter requesting oral argument that was to be filed with court on 5/1/02 but was never filed due to inadvertent vendor error; Oral Argument is req. on deft.'s motion for reargument (DI#62). (rd) [Entry date 05/07/02]
5/10/02	--	Deadline updated; set Telephone Conference for 2:00 5/16/02 re Discovery issues. (rd)
5/13/02	86	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re Subpoena for Stryker Corp. (rd) [Entry date 05/14/02]
5/13/02	87	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re Subpoena for Ethicon, Inc. (rd) [Entry date 05/14/02]

5/13/02	88	Amended NOTICE by Smith & Nephew Inc. to take deposition of Stryker Corp. on 5/21/02 (rd) [Entry date 05/14/02]
5/13/02	89	Amended NOTICE by Smith & Nephew Inc. to take deposition of Ethicon, Inc. on 5/20/02 (rd) [Entry date 05/14/02]
5/16/02	90	Letter to Judge Robinson from W. Marsden, Jr. re today's telecnf. with the court; and enclosing proposed amended scheduling order. (rd)
5/16/02	91	NOTICE by Smith & Nephew Inc. to take deposition of Hira V. Thapliyal on 6/12/02 (rd) [Entry date 05/17/02]
5/16/02	--	Tele-conference held re Discovery issues; Judge Robinson presiding; crt. rptr. B. Gaffigan present. (rd) [Entry date 05/17/02]
5/17/02	--	Deadline updated; set Discovery Hearing for 4:30 8/19/02 set during discovery telecnf. on 5/16/02 (rd)
5/17/02	92	TRANSCRIPT filed [0-0] telephone conference for dates of 5/16/02; Judge Robinson presiding; crt. rptr. B. Gaffigan present. (rd)
5/20/02	93	Steno Notes for 5/16/02; Judge Robinson presiding; crt. rptr. B. Gaffigan present. (rd) [Entry date 05/21/02]
5/29/02	94	CERTIFICATE OF SERVICE by ArthroCare Corp. re (1) 2nd set of interrog. and (2) 2nd set of req. for prod. of doc. and things. (rd) [Entry date 05/30/02]
5/29/02	95	SEALED Letter to Judge Robinson from J. Blumenfeld dated 5/29/02. (rd) [Entry date 05/30/02]
5/30/02	96	Letter to Judge Robinson from W. Marsden, Jr., advising court of status of case and requesting that the stay in the dicovery related to the Control RF product continue while parties continue their nego. (rd) [Entry date 05/31/02]
6/7/02	--	Deadline updated; set Telephone Conference for 2:00 6/11/02 (rd)
6/11/02	97	Letter to Judge Robinson from J. Blumenfeld re agenda for 6/11/02 telecnf. (rd)
6/11/02	--	Tele-conference held; Judge Robinson presiding; crt. rptr. V. Gunning present. (rd) [Entry date 06/13/02]
6/11/02	98	Letter to Judge Robinson from W. Marsden, Jr. responding to Mr. Blumenfeld's letter of 5/29/02. (rd) [Entry date 06/13/02]
6/12/02	99	Letter to Judge Robinson from J. Blumenfeld enclosing a revised proposed scheduling order. (rd) [Entry date 06/13/02]
6/12/02	100	Proposed Revised Scheduling Order filed by ArthroCare Corp. (rd) [Entry date 06/13/02]
6/13/02	--	Deadline updated; set Discovery Hearing for 3:00 7/23/02

		(rd)
6/17/02	--	So Ordered [100-1] proposed order reset Scheduling Order Deadlines: Discovery deadline on 12/16/02 Deadline for filing dispositive motions by 1/3/03; answers due 1/17/03; and reply briefs due 1/24/03, and reset Notice of Compliance deadline to 1/3/03 for parties to file opening claim construction briefs and Joint Claim Construction Statement; on 1/17/03 parties shall file answering claim const. briefs (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
6/28/02	101	TRANSCRIPT filed [0-0] telephone conference for dates of 06/11/02; Judge Robinson presiding; Crt Rptr V. Gunning present. (rd) [Entry date 07/02/02]
7/1/02	102	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re (1)Resp. to modified 1st set of interrog (Nos.1-7) and (2) Resp. to modified 1st set of req for prod of docs (nos. 1-54) (rd) [Entry date 07/02/02]
7/2/02	103	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re (1) Resp to 2nd set of interrogs (Nos. 8-13) and (2) Resp to 2nd set of req. for prod. of docs (Nos. 55-74) (rd)
7/23/02	104	Letter to Judge Robinson from W. Marsden, Jr. re topics for status conference on 7/23/02 (rd)
7/23/02	105	Letter to Judge Robinson from J. Blumenfeld re matters for the agenda for the conference on 7/23/02 (rd)
7/23/02	--	Discovery hearing held Judge Robinson presiding; Crt rptr B. Gaffigan present (rd) [Entry date 07/24/02]
7/23/02	106	Steno Notes for 7/23/02; Discovery hearing; Crt Rptr B. Gaffigan (rd) [Entry date 07/24/02]
7/24/02	107	MOTION by Smith & Nephew Inc. with Proposed Order to Bifurcate Willfulness and Damages, and to Stay Discovery Answer Brief due 8/7/02 re: [107-1] motion, Answer Brief due 8/7/02 re: [107-2] motion (rd)
7/24/02	108	Opening Brief Filed by Smith & Nephew Inc. [107-1] motion to Bifurcate Willfulness and Damages, [107-2] motion to Stay Discovery (rd)
7/24/02	109	Declaration of William J. Marsden, Jr. in support of DI # 107 (rd)
7/25/02	--	Deadline updated; set Telephone Conference for 4:00 8/27/02 (ft)
7/25/02	110	SEALED TRANSCRIPT filed [0-0] discovery hearing for dates of 7/23/02; Judge Robinson Presiding; Crt Rptr: B. Gaffigan (ft) [Entry date 07/26/02] [Edit date 07/26/02]
7/31/02	111	SEALED Second MOTION by Smith & Nephew Inc. for Leave to File amended answer and counterclm Answer Brief due 8/14/02 re: [111-1] motion (ft) [Edit date 07/31/02]

7/31/02	112	SEALED Opening Brief Filed by Smith & Nephew Inc. [111-1] motion for Leave to File amended answer and counterclm (ft)
7/31/02	113	SEALED Declaration of Keith A. Walter, Jr. in support of Smith & Nephew's second motion for leave to amend answer and counterclm. (ft)
8/2/02	114	STIPULATION to extend time for pltf to serve and file its answering brief in opposition to dft's motion to bifurcate willfulness and damages and stay discovery (DI # 108); with proposed order (ft) [Entry date 08/05/02]
8/2/02	115	Letter to Clerk from W. Marsden, Jr. enclosing a corrected cover page and page 2 to Dft Smith & Nephew's Opening Brief in Support of its Motion to Bifurcate Willfulness and Damages (DI # 108); requests the pages to be substituted; also enclosed is a corrected form of the Motion filed on 7/23/02 (DI # 107) (ft) [Entry date 08/05/02] [Edit date 08/05/02]
8/6/02	--	So Ordered granting [114-1] stipulation reset Answer Brief Deadline to 8/9/02 re: [107-1] motion to Bifurcate Willfulness and Damages, 8/9/02 re: [107-2] motion to Stay Discovery (signed by Judge Sue L. Robinson) Notice to all parties. (ft)
8/7/02	116	NOTICE by ArthroCare Corp. to take deposition of Joan McCreary on 8/21/02 (rd) [Entry date 08/09/02]
8/7/02	117	NOTICE by ArthroCare Corp. to take deposition of Karen Drucker on 8/22/02 (rd) [Entry date 08/09/02]
8/7/02	118	3rd NOTICE by ArthroCare Corp. to take deposition of deft. Smith & Nephew on 8/20/02 (rd) [Entry date 08/09/02]
8/7/02	119	2nd NOTICE by ArthroCare Corp. to take deposition of deft. Smith & Nephew on 8/19/02 (rd) [Entry date 08/09/02]
8/9/02	120	SEALED Answer Brief Filed by ArthroCare Corp. [107-1] motion to Bifurcate Willfulness and Damages - Reply Brief due 8/16/02, [107-2] motion to Stay Discovery - Reply Brief due 8/16/02 (rd) [Entry date 08/12/02]
8/12/02	121	STIPULATION to extend time for pltf. to file answering brief to DI#111; with proposed order (rd) [Entry date 08/13/02]
8/13/02	--	Deadline updated; set Telephone Conference for 4:30 8/15/02 (rd)
8/14/02	122	Letter to Clerk from J. Blumenfeld enclosing new page 17 to be substituted into DI#120. (rd) [Entry date 08/15/02]
8/15/02	--	So Ordered granting [121-1] stipulation reset Answer Brief Deadline to 8/16/02 re: [111-1] motion for Leave to File amended answer and counterclm (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
8/15/02	123	STIPULATION to extend time for deft. to file reply brief to DI#107; with proposed order (rd)

8/15/02	124	Letter to Judge Robinson from W. Marsden, Jr. identifying issues deft. shall raise at telecnf. on 8/15/02 (rd)
8/15/02	125	Letter to Judge Robinson from J. Blumenfeld re subjects for today's telecnf. (rd)
8/15/02	--	Tele-conference held re discovery; Judge Robinson presiding; crt. rptr. B. Gaffigan. (rd) [Entry date 08/19/02]
8/16/02	--	So Ordered granting [123-1] stipulation reset Reply Brief Deadline to 8/21/02 re: [107-1] motion to Bifurcate Willfulness and Damages, 8/21/02 re: [107-2] motion to Stay Discovery (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
8/16/02	126	Steno Notes for 8/15/02 telecnf.; Judge Robinson presiding; crt. rptr. B. Gaffigan. (rd) [Entry date 08/19/02]
8/16/02	127	TRANSCRIPT filed [0-0] telephone conference for dates of 8/15/02; Judge Robinson presiding; crt. rptr. B. Gaffigan. (rd) [Entry date 08/19/02]
8/16/02	128	SEALED Answer Brief Filed by ArthroCare Corp. [111-1] motion for Leave to File amended answer and counterclm - Reply Brief due 8/23/02 (rd) [Entry date 08/19/02]
8/19/02	129	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re (1) obj. to ntc. of depo. of Karen Drucker; (2) obj. to ntc. of depo. of Joan McCreary; (3) obj. to 2nd ntc. of depo.; and (4) obj. to 3rd ntc. of depo. (rd)
8/21/02	130	SEALED Reply Brief Filed by Smith & Nephew Inc. [107-1] motion to Bifurcate Willfulness and Damages, [107-2] motion to Stay Discovery (ft) [Entry date 08/22/02]
8/21/02	131	SEALED Declaration of Keith A. Walter, Jr. in support of Smith & Nephew's Reply Brief in support of its Motion to Bifurcate Willfulness and Damages (ft) [Entry date 08/22/02] [Edit date 08/22/02]
8/22/02	132	NOTICE by ArthroCare Corp. to take deposition of Todd Plevinsky on 9/17/02; Mike Long on 9/18/02; Dianne DeLucia on 9/25/02; Ron Sparks on 9/26/02; David Balford on 9/27/02; Kara Weldon on 9/25/02; Kate Knudsen on 9/26/02; and Tom Ross on 9/27/02 (ft) [Entry date 08/23/02]
8/22/02	133	Letter to Deputy Clerk Tassone from K. Walter, Jr. re Smith & Nephew's Correct Reply Brief on its Motion to Bifurcate, clarifying the title to have "and Stay Discovery"; various corrections in the brief; requesting substitution of the brief for the one originally filed (D.I. # 130) (ft) [Entry date 08/23/02] [Edit date 08/23/02]
8/23/02	--	Deadline updated; set Telephone Conference for 4:00 8/27/02 re status (rd)
8/23/02	134	STIPULATION to extend time for the dft. to file its Reply

		Brief in support of its Second Motion for Leave to Amend Answer and Counterclaim; with proposed order (ft) [Entry date 08/26/02]
8/26/02	135	SEALED Reply Brief Filed by Smith & Nephew Inc. [111-1] Second motion for Leave to File amended answer and counterclm (ft) [Entry date 08/27/02]
8/26/02	136	Letter to Judge Robinson from K. Walter, Jr. requesting oral argument on Smith & Nephew's Motion to Bifurcate Willfulness and Damages, and Stay Discovery (D.I. 107) (ft) [Entry date 08/27/02]
8/26/02	137	Letter to Judge Robinson from M. Noreika enclosing a copy of an order entered by Judge Sleet in C.A. No. 01-051 GMS; pertinent to D.I. # 45, D.I. # 55, and D.I. # 65 in C.A. No. 01-504-SLR (ft) [Entry date 08/27/02]
8/27/02	--	So Ordered granting [134-1] stipulation reset Reply Brief Deadline to 8/26/02 re: [111-1] motion for Leave to File amended answer and counterclm (signed by Judge Sue L. Robinson) Notice to all parties. (ft)
8/27/02	138	Letter to Judge Robinson from K. Walter re agenda for telephone conference at 4:00pm 8/27/02 (ft)
8/27/02	139	Letter to Judge Robinson from K. Walter responding to M. Noreika's letter of 8/26/02 and submitting supplemental authority to the court pursuant to DE Local Rule 7.1.2(c) (ft)
8/27/02	140	Letter to Judge Robinson from M. Noreika re issues that need to be addressed at the teleconference at 4:00 pm 8/27/02; Arthrocare wishes to discuss deposition scheduling and the status of the accused Dyonics Control RF Product (ft)
8/27/02	--	Tele-conference held; Judge Robinson presiding; Crt Rptr K. Maurer; re case status (ft) [Entry date 08/28/02]
8/29/02	141	MEMORANDUM ORDER denying [62-1] motion for Reargument of [53-1] order, denying [45-1] motion for Leave to File Amended Answer & Counterclaim (signed by Judge Sue L. Robinson) copies to: cnsl. (rd)
8/29/02	142	Letter to Judge Robinson from K. Walter, Jr. requesting oral argument on Smith & Nephew's Second Motion for Leave to Amend Answer and Counterclaim (DI # 111) (ft) [Entry date 09/03/02]
8/29/02	145	Steno Notes for 8/27/02; notes of telecnf.; Judge Robinson presiding; Crt Rptr K. Maurer (ft) [Entry date 09/06/02]
9/3/02	143	TRANSCRIPT filed [0-0] telephone conference for dates of 8/27/02; Judge Robinson presiding; Crt Rptr K. Maurer (ft) [Entry date 09/04/02]
9/4/02	144	Revised First NOTICE by ArthroCare Corp. to take deposition of Smith & Nephew, Inc. on 9/26/02 (ft) [Entry date 09/06/02]

9/6/02	146	NOTICE by Smith & Nephew Inc. to take deposition of Arthrocare Corp. on 9/24/02 (rd) [Entry date 09/09/02]
9/6/02	147	Letter to Judge Robinson from J. Blumenfeld re pending motion to bifurcate willfulness adn damages (DI#107). (rd) [Entry date 09/09/02]
9/10/02	148	NOTICE by Smith & Nephew Inc. to take deposition of Alan Weinstein on 10/4/02 (ft) [Entry date 09/13/02]
9/10/02	149	NOTICE by Smith & Nephew Inc. to take deposition of James Pacek on 10/2/02 (ft) [Entry date 09/13/02]
9/10/02	150	NOTICE by Smith & Nephew Inc. to take deposition of Jean Woloszko on 10/1/02 (ft) [Entry date 09/13/02]
9/10/02	151	NOTICE by Smith & Nephew Inc. to take deposition of Fernando Sanchez on 10/3/02 (ft) [Entry date 09/13/02]
9/10/02	152	NOTICE by ArthroCare Corp. to take deposition of Mark Kieras, Linda Guthrie, and Duane Marion; date to be provided by Smith & Nephew no later than 9/11/02, (ft) [Entry date 09/13/02]
9/10/02	153	Letter to Judge Robinson from W. Marsden, Jr. responding to D.I. # 147 regarding the timing of Smith & Nephew's election whether or not to rely on the advice of cnsl as a defense to ArthroCare's charge of willful infringement; Arthrocare seeks a ruling in its favor on Smith & Nephew's motion to bifurcate and stay (D.I. #107) without waiting for a decision on the merits of that fully briefed motion (ft) [Entry date 09/13/02]
9/11/02	154	NOTICE by Smith & Nephew Inc. to take deposition of Dennis Denen on 9/20/02 (ft) [Entry date 09/16/02]
9/11/02	155	Objections to pltf Arthrocare Corporation's Revised First Notice of Deposition by Smith & Nephew Inc. (ft) [Entry date 09/16/02]
9/12/02	156	Fourth NOTICE by ArthroCare Corp. to take deposition of Smith & Nephew, Inc. on 9/27/02 (ft) [Entry date 09/16/02] [Edit date 09/16/02]
9/13/02	157	NOTICE by Smith & Nephew Inc. to take deposition of Andrew R. Eggers on 10/2/02 (ft) [Entry date 09/16/02]
9/13/02	158	NOTICE by Smith & Nephew Inc. to take deposition of Philip E. Eggers on 9/26/02 (ft) [Entry date 09/16/02]
9/13/02	159	NOTICE by Smith & Nephew Inc. to take deposition of Eric A. Eggers on 10/1/02 (ft) [Entry date 09/16/02]
9/13/02	160	MOTION by Smith & Nephew Inc. with Proposed Order for Reconsideration of a portion of the Court's [141-1] order seeks reargument and reconsideration of paragraphs 2 and 3 of the Order; Answer Brief due 9/27/02 re: [160-1] motion (ft) [Entry date 09/16/02]
9/25/02	161	Letter to Judge Robinson from J. Blumenfeld requesting a

		teleconf. to resolve disputes in connection with depositions; Fact discovery due to close 10/15/02 (ft) [Entry date 09/26/02]
9/26/02	162	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re subpoena upon Andrew Eggers, Eggers & Associates, Inc., Dublin, OH (ft) [Entry date 09/30/02]
9/26/02	163	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re subpoena upon Eric Eggers, Eggers & Associates, Inc., Dublin, OH (ft) [Entry date 09/30/02]
9/26/02	164	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re subpoena upon Gyrus Medical, Ltd., Maple Grove, MN (ft) [Entry date 09/30/02]
9/26/02	165	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re subpoena upon Philip Eggers, Eggers & Associates, Inc., Dublin, OH (ft) [Entry date 09/30/02]
9/26/02	166	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re subpoena upon the Custodian of Records, Eggers & Associates, Inc., Dublin, OH (ft) [Entry date 09/30/02]
9/26/02	167	Answer Brief Filed by ArthroCare Corp. [160-1] motion for Reconsideration of a portion of the Court's [141-1] order - Reply Brief due 10/3/02 (ft) [Entry date 09/30/02]
9/27/02	168	Letter to Judge Robinson from W. Marsden, Jr. responding to Mr. Blumenfeld's letter of 9/25/02 (DI # 161) requesting a teleconf to resolve discovery disputes that have arisen; Smith & Nephew agrees that a teleconf. is needed but writes to correct the record with respect to the issues raised by ArthroCare and identify additional discovery issues Smith & Nephew would like the Court to address at the teleconf. (ft) [Entry date 10/01/02]
9/27/02	169	CERTIFICATE OF SERVICE by ArthroCare Corp. re objs to ntc of deposition (ft) [Entry date 10/01/02]
9/27/02	170	Objections to Smith & Nephew's Notice of Deposition under Fed. R. Civ. P. 30 (b)(6) by ArthroCare Corp. (ft) [Entry date 10/01/02]
10/3/02	171	NOTICE by Smith & Nephew Inc. to take deposition of Jack C. Cordes on 10/15/02 (ft) [Entry date 10/07/02]
10/3/02	172	MOTION by Smith & Nephew Inc. with Proposed Order to Strike [167-1] answer brief(Arthrocare Corporation's Opposition to Smith & Nephew's Motion for Reargument) Answer Brief due 10/17/02 re: [172-1] motion (ft) [Entry date 10/07/02]
10/7/02	173	MOTION by Smith & Nephew Inc. with Proposed Order for Thomas M. Johnston, Esq. and Katherine D. Prescott, Esq. to Appear Pro Hac Vice re: [173-1] motion (ft) [Entry date 10/08/02]
10/8/02	--	So Ordered granting [173-1] motion for Thomas M. Johnston, Esq. and Katherine D. Prescott, Esq. to Appear Pro Hac Vice

		(signed by Judge Sue L. Robinson) Notice to all parties. (rd) [Entry date 10/09/02]
10/10/02	174	Letter to Judge Robinson from K. Walter, Jr. requesting a teleconference with the Court to resolve discovery disputes that have arisen in connection with fact discovery and in connection with the parties' letters previously submitted on 9/25/02 and 9/27/02; two general issues which require guidance before the close of fact discovery on 10/15/02; Smith & Nephew requests that the remaining deadlines in this case be extended to allow Smith & Nephew time to gather all the evidence to which it is entitled to prepare for trial (ft)
10/11/02	--	Deadline updated; set Telephone Conference for 8:30 10/15/02 (ft)
10/15/02	175	CERTIFICATE OF SERVICE by ArthroCare Corp. re (1) suppl. obj. and resp. to 1st set of interrogs. (nos. 4-6); and (2) suppl. obj. and resp. to interrogs. (nos. 20 and 21) (rd)
10/15/02	--	Tele-conference held; Judge Robinson presiding; crt. rptr. B. Gaffigan present; re discovery issues. (rd)
10/15/02	--	Deadline updated; set Discovery Hearing for 9:30 10/30/02set during telecnf. on 10/15/02 (rd)
10/15/02	176	SEALED Letter from Jack B. Blumenfeld to the Honorable Sue L. Robinson dated 10/15/02 (ft) [Entry date 10/16/02]
10/15/02	177	TRANSCRIPT filed [0-0] telephone conference for dates of 10/15/02; Judge Robinson presiding; Crt Rptr B. Gaffigan (ft) [Entry date 10/17/02]
10/16/02	178	CERTIFICATE OF SERVICE by ArthroCare Corp. re supplemental objs and resp to dft interrog No. 11 (ft) [Entry date 10/17/02]
10/17/02	179	Steno Notes for 10/15/02 teleconference; Judge Robinson presiding; Crt Rptr B. Gaffigan (ft)
10/18/02	180	Answer Brief Filed by ArthroCare Corp. [172-1] motion to Strike [167-1] answer brief(Arthrocare Corporation's Opposition to Smith & Nephew's Motion for Reargument) - Reply Brief due 10/25/02 (ft)
10/29/02	181	Letter to Judge Robinson from J. Blumenfeld re conference at 9:30 10/30/02; ArthroCare would like to raise the following matters: 1. Status of Depositions; 2. Status of Document Production; 3. Scheduling; 4. Smith & Nephew's Invalidity Contentions; and 5. Reliance on Advice of Counsel (ft)
10/30/02	182	Letter to Judge Robinson from W. Marsden re conference at 9:30 10/30/02; would like to raise the following matters: 1. scheduling; 2. deposition status; 3. document production; 4. contention interrogatories (ft)
10/30/02	--	Discovery hearing held; Judge Robinson presiding; Crt Rptr V. Gunning present; re discovery issues; Smith & Nephew

		ordered to produce certain docs for in camera review; Arthrocare to produce prior art through date of patent issue; Arthrocare must identify docs from Mr. Eggers or allow Smith & Nephew to review Mr. Egger's docs; Arthrocare ordered to search for emails or confirm none exist; all parties to schedule remaining depositions within one week (ft)
10/30/02	--	Deadline updated; set Telephone Conference for 12:00 11/7/02 set in court on 10/30/02 (ft)
11/6/02	183	Letter to Judge Robinson from J. Blumenfeld re status of discovery in advance of telephone conference; would like to discuss items 4 and 5 of 10/29/02 letter; attached is a proposed revision to the scheduling order (ft)
11/7/02	184	Letter to Judge Robinson from M. Hebert writing on behalf of Smith & Nephew to list the items would like to raise during 11/7/02 telephone conference (ft)
11/7/02	--	Tele-conference held; Judge Robinson presiding; crt. rptr. B. Gaffigan; re discovery issues; set oral argument on "stay" for 11/25/02 at 11:00; parties to file briefs re motion for stay shortly. (rd)
11/7/02	--	Deadline updated; set Oral Argument for 11:00 11/25/02 re "stay"; set during telecnf. on 11/7/02 (rd)
11/8/02	185	TRANSCRIPT filed [0-0] telephone conference for dates of 11/7/02; Judge Robinson presiding; Court Rptr B. Gaffigan (ft) [Entry date 11/12/02]
11/12/02	186	Steno Notes for 11/7/02 teleconference; Judge Robinson presiding; Crt Rptr B. Gaffigan (ft)
11/14/02	187	MOTION by Smith & Nephew Inc. with Proposed Order to Stay these proceedings pending the reexamination of U.S. Patent '536 Answer Brief due 11/29/02 re: [187-1] motion (ft) [Entry date 11/15/02]
11/14/02	188	SEALED Memorandum in Support Filed by Smith & Nephew Inc. [187-1] motion to Stay these proceedings pending the reexamination of U.S. Patent '536 (ft) [Entry date 11/15/02]
11/14/02	189	SEALED Declaration of Mark Hebert in support of DI # 188 (ft) [Entry date 11/15/02] [Edit date 11/15/02]
11/15/02	190	Letter to Judge Robinson from W. Marsden, Jr. enclosing documents and explanation of redactions to the Court for in camera review in accordance with the Court's instructions in the 10/30/02 conference and 11/7/02 teleconference; Smith & Nephew has also provided the declaration of Eugene B. Joswick; the documents and the declaration disclose privileged information and have not been served on ArthroCare; (Sealed enclosures given to Judge Robinson) (ft) [Entry date 11/18/02] [Edit date 11/20/02]
11/18/02	191	Letter to Judge Robinson from K. Walter, Jr. enclosing, in addition to the material Smith & Nephew submitted on 11/15/02 for in camera review, copies of SN 20822 in

		redacted and unredacted form and an explanation for the redaction attached as Exhibit A; material was inadvertently omitted from the binder that Smith & Nephew submitted on 11/15/02 (Sealed enclosures given to Judge Robinson) (ft) [Edit date 11/20/02]
11/18/02	192	Letter to Clerk from W. Marsden, Jr. enclosing the original signature page for Declaration of Mark J. Hebert in support of Smith & Nephew's Motion to Stay (DI 189); requests replace the faxed version previously submitted with the enclosed original (ft) [Entry date 11/19/02]
11/18/02	193	CERTIFICATION OF PERRY CLARK by ArthroCare Corp. re illegible documents; to the extent better copies could be located, they were produced to Smith & Nephew at Mr. Eggers' deposition on 11/13/02 (ft) [Entry date 11/19/02]
11/21/02	194	SEALED Answer Brief Filed by ArthroCare Corp. [187-1] motion to Stay these proceedings pending the reexamination of U.S. Patent '536 - Reply Brief due 11/29/02 (ft) [Entry date 11/22/02]
11/21/02	195	SEALED Appendix to Brief Filed by ArthroCare Corp. Appending [194-1] answer brief (ft) [Entry date 11/22/02]
11/22/02	196	Letter to Judge Robinson from W. Marsden re addressing some issues have yet to resolve with ArthroCare regarding its document production; requests that the Court order ArthroCare to produce the requested documents and information (ft) [Entry date 11/25/02]
11/22/02	197	Letter to Judge Robinson from M. Hebert re partially-illegible documents that came up during the Telecnf. on 11/7/02 (ft) [Entry date 11/25/02]
11/22/02	198	MOTION by Smith & Nephew Inc. with Proposed Order to Compel Ethicon, Inc. to comply with subpoena Duces Tecum and Ad Testificandum Answer Brief due 12/6/02 re: [198-1] motion (ft) [Entry date 11/25/02]
11/22/02	199	SEALED Opening Brief Filed by Smith & Nephew Inc. [198-1] motion to Compel Ethicon, Inc. to comply with subpoena Duces Tecum and Ad Testificandum (ft) [Entry date 11/25/02]
11/22/02	200	SEALED Declaration of Thomas M. Johnston in support of DI # 198 (ft) [Entry date 11/25/02]
11/25/02	201	Letter to Judge Robinson from K. Jacobs Louden enclosing DI # 202, a proposed Revised Scheduling Order (ft)
11/25/02	202	Proposed Revised Scheduling Order filed by ArthroCare Corp. (ft)
11/25/02	203	TRANSCRIPT filed [0-0] discovery hearing for dates of 10/30/02; Judge Robinson presiding; Crt Rptr V. Gunning (ft)
11/25/02	204	SEALED MOTION by Smith & Nephew Inc. to Strike Documents as inadmissible hearsay Answer Brief due 12/9/02 re: [204-1] motion (ft)

11/25/02 --	Status conference held; Judge Robinson presiding; Crt Rptr Hawkins; decisions: (1) produce illegible documents-Denied; (2) Motion for Re-Argument on inequitable conduct-Denied; and (3) Trial will be bifurcated into liability and Damages (ft) [Entry date 12/02/02]
11/26/02 205	Letter MOTION by ArthroCare Corp. to object to the disclosure of ArthroCare's confidential information to Kenneth Burchfiel, Smith & Nephew's proposed patent law expert Arthrocare objected to the disclosure; Mr. Burchfiel has no need to view ArthroCare's confidential information; should not be permitted access to ArthroCare's confidential information re: [205-1] motion (ft)
11/27/02 206	Memorandum ORDER denying [187-1] motion to Stay these proceedings pending the reexamination of U.S. Patent '536; see order for reasons; denying [172-1] motion to Strike [167-1] answer brief(Arthrocare Corporation's Opposition to Smith & Nephew's Motion for Reargument), denying [160-1] motion for Reconsideration of a portion of the Court's [141-1] order, granting [111-1] motion for Leave to File amended answer and counterclm; However, discovery and trial of dft's newly added counterclaim for antitrust violations are stayed consistent with the ruling on the issues of damages and willfullfulness; granting [107-1] motion to Bifurcate Willfulness and Damages, granting [107-2] motion to Stay Discovery; discovery on the issues of willfulness and damages will be stayed until after the verdict on infringement and invalidity has been returned; these issues will be tried to a new jury; Dft's claim of privilege pertaining to redactions in certain documents (DI # 190) is denied; court finds that the info. redacted is equivalent to the info. required to be included in a privilege log, and thus not privileged info.(signed by Judge Sue L. Robinson) copies to: cnsl (ft)
11/27/02 207	Letter to Clerk from K. Walter, Jr. re hearing before Judge Robinson yesterday; counsel for Smith & Nephew distributed the attached Table entitled Comparison of '592 and '536 Patent Claim Language; submitting for filing with the court; also filing separately, the Supplemental Declaration of Mark Hebert (DI # 208), which was also distributed at the hearing (ft)
11/27/02 208	Supplemental Declaration of Mark J. Hebert in support of Smith & Nephew's Motion to Stay (ft)
11/27/02 209	TRANSCRIPT filed for Oral Argument for dates of 11/25/02; Judge Robinson presiding; Crt Rptr. Hawkins Reporting Service (ft) [Entry date 12/02/02]
11/27/02 219	Amended ANSWER to complaint and COUNTERCLAIM by Smith & Nephew Inc. ; jury demand against ArthroCare Corp. (rd) [Entry date 12/23/02]
11/27/02 --	So Ordered mooting [204-1] motion to Strike Documents as inadmissible hearsay per D.I. # 206 (Memorandum Order) (ft) [Entry date 04/09/03]
12/2/02 210	Letter to Judge Robinson from J. Blumenfeld re proposed

		revised scheduling order filed on 11/25/02 (DI # 201 and 202); now that the stay motion has been denied, would like to get a schedule in place promptly; request that it be entered (ft) [Entry date 12/03/02]
12/3/02	211	Letter to Judge Robinson from J. Blumenfeld re 11/27/02 Order; granted Smith & Nephew's motion to amend its answer to assert an antitrust counterclaim; stayed discovery and trial on that counterclaim until after the trial of the patent issues; it is ArthroCare's understanding that it need not respond to the antitrust counterclaim until after the patent trial (ft) [Entry date 12/04/02]
12/3/02	212	Letter to Judge Robinson from W. Marsden, Jr. responding to DI # 210 requesting entry of ArthroCare's proposed scheduling order; Smith & Nephew opposes entry of the proposed scheduling order; enclosing Smith & Nephew's proposed scheduling order; request entry; alternatively, request a teleconference to resolve scheduling issues (ft) [Entry date 12/04/02]
12/3/02	214	SEALED Letter to The Honorable Sue L. Robinson from Jack R. Blumenfeld (ft) [Entry date 12/06/02]
12/4/02	213	Letter to Judge Robinson from J. Blumenfeld re Smith & Nephew's letter of 12/3/02 and proposed scheduling order; parties have proposed different paths; available for a telephone conference (ft) [Entry date 12/06/02]
12/9/02	215	STIPULATION to extend time for Ethicon, Inc. to file an answering brief in opposition to DI # 198; with proposed order (ft) [Entry date 12/10/02]
12/10/02	216	SEALED Letter to Chief Judge Sue L. Robinson from William J. Marsden, Jr. responding to outstanding document production issues with Exhibits A through H (ft) [Entry date 12/11/02]
12/11/02	--	So Ordered granting [215-1] stipulation reset Answer Brief Deadline to 1/17/03 re: [198-1] motion to Compel Ethicon, Inc. to comply with subpoena Duces Tecum and Ad Testificandum (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
12/11/02	217	Letter to Judge Robinson from W. Marsden, Jr. responding to Ms. Jacobs Louden's letter of 11/26/02 (DI # 204); request that the Court overrule ArthroCare's objection and allow Smith & Nephew to show confidential material to its patent law expert (ft) [Entry date 12/12/02]
12/23/02	218	Letter to Judge Robinson from J. Blumenfeld requesting a conference with the Court so that a schedule for the remainder of the case can be put into place leading to the 4/28/03 trial date (ft)
12/26/02	220	Letter to Judge Robinson from W. Marsden, Jr. re DI # 218; letter of 12/23/02 requesting a teleconf. to set a schedule for the remainder of this case; Smith & Nephew would have no objection to the Court extending the trial date to allow time for decision on the Markman issues and sum jgm.; seek

		Court's assistance in narrowing the issues for trial; request that the Court schedule a date two weeks before burden expert reports are due that ArthroCare must narrow the claims to the handful they wish to take to trial (ft) [Entry date 12/30/02]
1/2/03	221	Letter to Judge Robinson from J. Blumenfeld responding to Smith & Nephew's 12/26 letter concerning the setting of a schedule and the 4/28/03 trial date (DI # 220); no reason why this case cannot be ready for trial 4 months from now; ArthroCare again requests a conference to get the scheduling impasse resolved (ft) [Entry date 01/03/03]
1/9/03	--	Deadline updated; set Status Conference for 2:00 1/22/03 per recent filings by the parties re scheduling matters (rd)
1/9/03	222	Letter to Judge Robinson from K. Jacobs Louden confirming that the Court has set an in-person status conference on 1/22/03 at 2:00 p.m. (ft) [Entry date 01/10/03]
1/17/03	223	SEALED Answer Brief Filed by Ethicon, Inc [198-1] motion to Compel Ethicon, Inc. to comply with subpoena Duces Tecum and Ad Testificandum - Reply Brief due 1/24/03 (rd) [Entry date 01/21/03]
1/22/03	224	Steno Notes for 1/22/03 Status Conference; Judge Robinson presiding; Crt Rptr. L. Dibbs (ft) [Entry date 01/23/03]
1/22/03	--	Status conference held; Judge Robinson presiding; crt. rptr. L. Dibbs (rd) [Entry date 01/23/03]
1/22/03	--	So Ordered mooting [198-1] motion to Compel Ethicon, Inc. to comply with subpoena Duces Tecum and Ad Testificandum; per Status Conference 1/22/03 (ft) [Entry date 04/09/03]
1/23/03	225	Revised SCHEDULING ORDER; on or before 1/29/03 deft. shall submit to pltf. its final claim construction; on or before 2/5/03 pltf. shall file its expert report(s) on issues for which it has the burden of proof (most notably-infringement); deft. shall file its rebuttal expert report by 2/19/03; by 2/12/03 deft. shall file its expert report(s) for which it has the burden of proof (most notably invalidity); pltf. shall file rebuttal expert report by 2/26/03; summary jgm. motions due 3/4/03; oral argument shall be 4/1/03 at 4:30; all motions in limine due 4/1/03 with responses due 4/8/03; setting Pretrial conference for 4:30 4/15/03 ; Jury Trial Date Deadline 9:30 4/28/03 ; See order for further details (signed by Judge Sue L. Robinson) copies to: cnsl. (rd)
1/23/03	--	Deadline updated; Oral Arugment on Summary Jgm. Motions for 4:30 4/1/03 per DI#225 (rd)
1/24/03	226	TRANSCRIPT filed [0-0] status conference for dates of 1/22/03; Judge Robinson presiding; Crt Rptr. L. Dibbs (ft)
1/27/03	227	SEALED Reply Brief Filed by Smith & Nephew Inc. [198-1] motion to Compel Ethicon, Inc. to comply with subpoena Duces Tecum and Ad Testificandum (ft) [Entry date 01/29/03]

1/27/03	228	Declaration of Mark J. Hebert in support of DI # 227 (ft) [Entry date 01/29/03]
1/27/03	229	Notice of Deficiency from the court to defendant Smith & Nephew Inc.; no original signature on DI # 228 (ft) [Entry date 01/29/03]
1/28/03	230	Letter to Clerk from K. Walter, Jr. enclosing original signature page for DI # 228 which was filed on 1/27/03; please replace the faxed version previously submitted with the enclosed original (ft) [Entry date 01/29/03]
1/29/03	231	Letter MOTION by ArthroCare Corp. to object to the disclosure of ArthroCare's confidential information to Ronald Panitch, Smith & Nephew's proposed patent law expert re: [231-1] motion (ft) [Entry date 01/30/03]
1/30/03	232	Letter to Clerk from K. Walter, Jr. enclosing replacement Exhibits I and O which contain the correct letters to Declaration of Mark J. Hevert in Support of Smith & Nephew's Reply Brief in Support of its Motion to Compel Ethicon, which was filed on 1/27/03; replace the attached exhibits with version previously submitted with the original (ft) [Entry date 01/31/03]
1/31/03	233	Letter to Judge Robinson from S. Balick requesting oral argument on deft.'s motion to compel (D.I. 198). (rd) [Entry date 02/03/03]
2/3/03	234	STIPULATION to extend time for Ethicon to respond to the counterclaim; with proposed order (rd) [Entry date 02/04/03]
2/5/03	--	So Ordered granting [234-1] stipulation; Ethicon must respond to deft.'s counterclaim within 30 days after Ethicon's cnsl. receives ntc. from deft. Smith & Nephew's cnsl. that there has been a verdict in the patent trial (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
2/10/03	235	Letter to Judge Robinson from W. Marsden, Jr. requesting immediate telecnf. with court to address pltf.'s failure to limit the asserted claims (rd)
2/11/03	236	Letter to Judge Robinson from J. Blumenfeld responding to deft.'s letter of 2/10/03 (rd)
2/11/03	--	Deadline updated; set Telephone Conference for 7:30 2/13/03 per req. made in D.I. #235 (rd) [Edit date 02/11/03]
2/11/03	237	Letter to Judge Robinson from K. Walter, Jr. re 2/13/03 telecnf. and req. for relief from the 2/12/03 due date for deft.'s invalidity expert reports; req. court hold the due date for deft. until after the telecnf. date; cnsl. for pltf. opposes this request. (rd)
2/12/03	238	Letteri to Judge Robinson from K. Walter responding to J. Blumenfeld's letter D.I. 231. (rd)
2/13/03	--	Tele-conference held; Judge Robinson presiding; crt. rptr. K. Maurer present. (rd) [Entry date 02/14/03]

2/13/03	--	So Ordered mooting [205-1] letter/motion to object to the disclosure of ArthroCare's confidential information to Kenneth Burchfiel, Smith & Nephew's proposed patent law expert; per Telephone Conference of 2/13/03 (ft) [Entry date 04/09/03] [Edit date 04/09/03]
2/13/03	--	So Ordered mooting [231-1] motion to object to the disclosure of ArthroCare's confidential information to Ronald Panitch, Smith & Nephew's proposed patent law expert; per Telephone Conference of 2/13/03 (ft) [Entry date 04/09/03]
2/14/03	239	TRANSCRIPT filed [0-0] telephone conference for dates of 2/13/03; Judge Robinson presiding; crt. rptr. K. Maurer (rd)
2/14/03	240	Steno Notes for 2/13/03 telecnf.; Judge Robinson presiding; crt. rptr. K. Maurer. (rd) [Entry date 02/19/03]
2/20/03	241	STIPULATION to extend time for deft. to serve rebuttal expert reports with proposed order (rd)
2/21/03	--	So Ordered granting [241-1] stipulation extending time for deft. to serve its rebuttal expert reports until 2/21/03 (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
2/24/03	242	CERTIFICATE OF SERVICE by ArthroCare Corp. re Opening Expert Report of Dr. S. Nahum Goldberg (ft) [Entry date 02/27/03]
3/4/03	243	CERTIFICATE OF SERVICE by ArthroCare Corp. re Expert Reports of (1) Creighton Hoffman, (2)Charles Van Horn, (3) Dr. S. Nahum Goldberg and Dr. Elliott H. Leitman. (rd) [Entry date 03/05/03]
3/4/03	244	ArthroCare Corp. Opening Claim Construction Brief (rd) [Entry date 03/05/03]
3/4/03	245	SEALED Appendix to Brief Filed by ArthroCare Corp. Appending D.I. 244 re claim construction (rd) [Entry date 03/05/03]
3/4/03	246	SEALED Smith & Nephew Inc. Opening Claim Construction Brief (rd) [Entry date 03/05/03]
3/4/03	247	MOTION by ArthroCare Corp. for partial Summary Judgment that the asserted claims of the patents-in-suit are not invalid due to obviousness or based on an alleged on-sale bar or public use Answer Brief due 3/18/03 re: [247-1] motion (rd) [Entry date 03/05/03]
3/4/03	248	Opening Brief Filed by ArthroCare Corp. [247-1] motion for partial Summary Judgment that the asserted claims of the patents-in-suit are not invalid due to obviousness or based on an alleged on-sale bar or public use (rd) [Entry date 03/05/03]
3/4/03	249	MOTION by ArthroCare Corp. for partial Summary Judgment that deft. infringes the asserted claims of the '882 patent

		Answer Brief due 3/18/03 re: [249-1] motion (rd) [Entry date 03/05/03]
3/4/03	250	SEALED Opening Brief Filed by ArthroCare Corp. [249-1] motion for partial Summary Judgment that deft. infringes the asserted claims of the '882 patent (rd) [Entry date 03/05/03]
3/4/03	251	MOTION by ArthroCare Corp. with Proposed Order for Partial Summary Judgment that deft. infringes claim 1 of the '592 patent Answer Brief due 3/18/03 re: [251-1] motion (rd) [Entry date 03/05/03]
3/4/03	252	SEALED Opening Brief Filed by ArthroCare Corp. [251-1] motion for Partial Summary Judgment that deft. infringes claim 1 of the '592 patent (rd) [Entry date 03/05/03]
3/4/03	253	SEALED Appendix to Brief Filed by ArthroCare Corp. Appending [252-1] opening brief, [250-1] opening brief, [248-1] opening brief (rd) [Entry date 03/05/03]
3/4/03	254	Letter to Judge Robinson from W. Marsden detailing a brief description of the filings made today with the court on behalf of deft. (rd) [Entry date 03/05/03]
3/4/03	255	MOTION by Smith & Nephew Inc. with Proposed Order for partial Summary Judgment of non-infringement of U.S. Patents '536, '882, and '592 Answer Brief due 3/18/03 re: [255-1] motion (rd) [Entry date 03/05/03]
3/4/03	256	SEALED Opening Brief Filed by Smith & Nephew Inc. [255-1] motion for partial Summary Judgment of non-infringement of U.S. Patents '536, '882, and '592 (rd) [Entry date 03/05/03]
3/4/03	257	MOTION by Smith & Nephew Inc. with Proposed Order for Partial Summary Judgment of (1) nonenablement, (2) indefiniteness, and (3) lack of written description Answer Brief due 3/18/03 re: [257-1] motion (rd) [Entry date 03/05/03]
3/4/03	258	SEALED Opening Brief Filed by Smith & Nephew Inc. [257-1] motion for Partial Summary Judgment of (1) nonenablement, (2) indefiniteness, and (3) lack of written description (rd) [Entry date 03/05/03]
3/4/03	259	MOTION by Smith & Nephew Inc. with Proposed Order for Summary Judgment to enforce the settlement agreement removing control RF product from the case Answer Brief due 3/18/03 re: [259-1] motion (rd) [Entry date 03/05/03] [Edit date 03/05/03]
3/4/03	260	SEALED Opening Brief Filed by Smith & Nephew Inc. [259-1] motion for Summary Judgment to enforce the settlement agreement removing control RF product from the case (rd) [Entry date 03/05/03] [Edit date 03/05/03]
3/4/03	261	MOTION by Smith & Nephew Inc. with Proposed Order for Summary Judgment of invalidity based on prior art Answer Brief due 3/18/03 re: [261-1] motion (rd) [Entry date 03/05/03]

3/4/03	262	SEALED Opening Brief Filed by Smith & Nephew Inc. [261-1] motion for Summary Judgment of invalidity based on prior art (rd) [Entry date 03/05/03]
3/4/03	263	SEALED Declaration of William J. Marsden, Jr. in support of deft.'s summary jgm. motions filed 3/4/03 (rd) [Entry date 03/05/03]
3/4/03	264	SEALED Declaration of William J. Marsden, Jr. Volume 1 in support of Deft.'s summary jgm. motions filed 3/4/03 (rd) [Entry date 03/05/03]
3/4/03	265	SEALED Declaration of William J. Marsden, Jr. Volume 2 in support of Deft.'s summary jgm. motions filed 3/4/03 (rd) [Entry date 03/05/03]
3/4/03	266	SEALED Declaration of William J. Marsden, Jr. Volume 3 in support of Deft.'s summary jgm. motions filed 3/4/03 (rd) [Entry date 03/05/03]
3/4/03	267	SEALED Declaration of William J. Marsden, Jr. Volume 4 in support of Deft.'s summary jgm. motions filed 3/4/03 (rd) [Entry date 03/05/03]
3/4/03	268	SEALED Declaration of William J. Marsden, Jr. Volume 5 in support of Deft.'s summary jgm. motions filed 3/4/03 (rd) [Entry date 03/05/03]
3/4/03	269	Letter to Clerk from E. Joswick enclosing two sets of the Table of Authorities for deft.'s opening claim construction brief (rd) [Entry date 03/05/03]
3/5/03	270	SEALED Joint Claim Construction Statement (rd)
3/17/03	271	Letter to Judge Robinson from J. Blumenfeld advising that on 3/14/03, the Patent Office issued a Notice of Intent to Issue a Reexamination Certificate, a copy of which is attached as Exhibit A (ft) [Entry date 03/18/03]
3/17/03	272	MOTION by Smith & Nephew Inc. with Proposed Order to Strike the Expert Reports of Creighton G. Hoffman and Elliott H. Leitman Answer Brief due 3/31/03 re: [272-1] motion (ft) [Entry date 03/18/03]
3/17/03	273	SEALED Opening Brief Filed by Smith & Nephew Inc. [272-1] motion to Strike the Expert Reports of Creighton G. Hoffman and Elliott H. Leitman (ft) [Entry date 03/18/03]
3/18/03	274	MOTION by ArthroCare Corp. to Strike the Roos Declaration Answer Brief due 4/1/03 re: [274-1] motion (ft) [Entry date 03/19/03]
3/18/03	275	SEALED Answer Brief Filed by ArthroCare Corp. [259-1] motion for Summary Judgment to enforce the settlement agreement removing control RF product from the case - Reply Brief due 3/25/03 (ft) [Entry date 03/19/03]
3/18/03	276	Declaration of John T. Raffle (ft) [Entry date 03/19/03]

3/18/03	277	SEALED Declaration of Philip E. Eggers in Opposition to Smith & Nephew's Motion for Sum. Jgm. of Invalidity based on Prior Art (ft) [Entry date 03/19/03] [Edit date 03/19/03]
3/18/03	278	SEALED Declaration of Greighton G. Hoffman (ft) [Entry date 03/19/03]
3/18/03	279	SEALED Answer Brief Filed by ArthroCare Corp. [255-1] motion for partial Summary Judgment of non-infringement of U.S. Patents '536, '882, and '592 - Reply Brief due 3/25/03 (ft) [Entry date 03/19/03]
3/18/03	280	SEALED Answer Brief Filed by ArthroCare Corp. [261-1] motion for Summary Judgment of invalidity based on prior art - Reply Brief due 3/25/03 (ft) [Entry date 03/19/03]
3/18/03	281	SEALED Answering Brief by ArthroCare Corp. in opposition to [246-1] Opening Claim Construction Brief (ft) [Entry date 03/19/03]
3/18/03	282	SEALED Responsive Claim Construction Brief by Smith & Nephew Inc. (ft) [Entry date 03/19/03]
3/18/03	283	SEALED Answer Brief Filed by Smith & Nephew Inc. [247-1] motion for partial Summary Judgment that the asserted claims of the patents-in-suit are not invalid due to obviousness or based on an alleged on-sale bar or public use - Reply Brief due 3/25/03 (ft) [Entry date 03/19/03]
3/18/03	284	Answer Brief Filed by Smith & Nephew Inc. [249-1] motion for partial Summary Judgment that deft. infringes the asserted claims of the '882 patent - Reply Brief due 3/25/03 (ft) [Entry date 03/19/03]
3/18/03	285	SEALED Answer Brief Filed by Smith & Nephew Inc. [251-1] motion for Partial Summary Judgment that deft. infringes claim 1 of the '592 patent - Reply Brief due 3/25/03 (ft) [Entry date 03/19/03]
3/18/03	286	SEALED Declaration of Eugene B. Joswick (ft) [Entry date 03/19/03]
3/18/03	287	SEALED Declaration of Dr. S. Nahum Goldberg (Vol. 1) (ft) [Entry date 03/19/03]
3/18/03	288	SEALED Declaration of Dr. S. Nahum Goldberg (Vol. 2) (ft) [Entry date 03/19/03]
3/18/03	289	SEALED Declaration of Dr. S. Nahum Goldberg (Vol. 3) (ft) [Entry date 03/19/03]
3/18/03	290	SEALED Declaration of Dr. S. Nahum Goldberg (Vol. 4) (ft) [Entry date 03/19/03]
3/18/03	291	SEALED Declaration of Dr. S. Nahum Goldberg (Vol. 5) (ft) [Entry date 03/19/03]

3/18/03	292	SEALED Answer Brief Filed by ArthroCare Corp. [257-1] motion for Partial Summary Judgment of (1) nonenablement, (2) indefiniteness, and (3) lack of written description - Reply Brief due 3/25/03 (ft) [Entry date 03/19/03]
3/18/03	293	Arthrocare's Covenant not to sue Smith & Nephew on certain claims of the patents in suit (ft) [Entry date 03/19/03]
3/20/03	294	Letter to Clerk from K. Walter enclosing a Rule 7.1.1 Certificate for D.I. # 272; neglected to contact opposing cnsl. re the motion before filing, have since contacted and believe the motion will be opposed (ft)
3/21/03	295	Letter to Judge Robinson from W. Marsden, Jr. responding to D.I. # 271; Smith & Nephew requests that it be given leave to take Examiner Mendez' deposition, presuming that the appropriate approval can be obtained from the Patent Office (ft) [Entry date 03/24/03] [Edit date 03/24/03]
3/25/03	296	Reply Brief Filed by ArthroCare Corp. [249-1] motion for partial Summary Judgment that deft. infringes the asserted claims of the '882 patent (ft) [Entry date 03/26/03]
3/25/03	297	Reply Brief Filed by ArthroCare Corp. [251-1] motion for Partial Summary Judgment that deft. infringes claim 1 of the '592 patent (ft) [Entry date 03/26/03]
3/25/03	298	Reply Brief Filed by ArthroCare Corp. [247-1] motion for partial Summary Judgment that the asserted claims of the patents-in-suit are not invalid due to obviousness or based on an alleged on-sale bar or public use (ft) [Entry date 03/26/03]
3/25/03	299	SEALED Reply Brief Filed by Smith & Nephew Inc. [259-1] motion for Summary Judgment to enforce the settlement agreement removing control RF product from the case (ft) [Entry date 03/26/03]
3/25/03	300	SEALED Reply Brief Filed by Smith & Nephew Inc. [257-1] motion for Partial Summary Judgment of (1) nonenablement, (2) indefiniteness, and (3) lack of written description (ft) [Entry date 03/26/03]
3/25/03	301	SEALED Reply Brief Filed by Smith & Nephew Inc. [255-1] motion for partial Summary Judgment of non-infringement of U.S. Patents '536, '882, and '592 (ft) [Entry date 03/26/03]
3/25/03	302	SEALED Reply Brief Filed by Smith & Nephew Inc. [261-1] motion for Summary Judgment of invalidity based on prior art (ft) [Entry date 03/26/03]
3/25/03	303	SEALED Declaration of Michael A. Choti (ft) [Entry date 03/26/03]
3/25/03	304	SEALED Declaration of Kim H. Manwaring (ft) [Entry date 03/26/03]
3/25/03	305	SEALED Declaration of Keith A. Walter, Jr. (ft) [Entry date 03/26/03]

3/25/03	306	Declaration of Kenneth L. Taylor (ft) [Entry date 03/26/03]
3/25/03	307	Notice of Deficiency from the court to defendant Smith & Nephew Inc.; no original signature on Declaration of Kenneth L. Taylor (D.I. # 306) (ft) [Entry date 03/26/03]
3/26/03	--	Deadline updated; Motion Hearing set for 2:00 4/1/03 (moved from 4:30 p.m.) for [274-1] motion to Strike the Roos Declaration, [272-1] motion to Strike the Expert Reports of Creighton G. Hoffman and Elliott H. Leitman, [261-1] motion for Summary Judgment of invalidity based on prior art, [259-1] motion for Summary Judgment to enforce the settlement agreement removing control RF product from the case, [257-1] motion for Partial Summary Judgment of (1) nonenablement, (2) indefiniteness, and (3) lack of written description, [255-1] motion for partial Summary Judgment of non-infringement of U.S. Patents '536, '882, and '592, [251-1] motion for Partial Summary Judgment that deft. infringes claim 1 of the '592 patent, [249-1] motion for partial Summary Judgment that deft. infringes the asserted claims of the '882 patent, [247-1] motion for partial Summary Judgment that the asserted claims of the patents-in-suit are not invalid due to obviousness or based on an alleged on-sale bar or public use, [231-1] motion to object to the disclosure of ArthroCare's confidential information to Ronald Panitch, Smith & Nephew's proposed patent law expert, [205-1] motion to object to the disclosure of ArthroCare's confidential information to Kenneth Burchfiel, Smith & Nephew's proposed patent law expert, [204-1] motion to Strike Documents as inadmissible hearsay, [198-1] motion to Compel Ethicon, Inc. to comply with subpoena Duces Tecum and Ad Testificandum (rd)
3/26/03	308	Declaration of Brian W. Napper (ft) [Entry date 03/27/03]
3/26/03	309	Notice of Deficiency from the court to defendant Smith & Nephew Inc.; no original signature on Declaration of Brian W. Napper (D.I. # 308) (ft) [Entry date 03/27/03]
3/26/03	310	CERTIFICATE OF SERVICE by Smith & Nephew Inc. re supplemental response to modified 1st set of interrogs (No. 6) (ft) [Entry date 03/27/03]
3/26/03	311	Letter to Clerk from K. Walter, Jr. enclosing the original signature page for the Declaration of Kenneth D. Taylor (D.I. # 306); replace the faxed version with the original (ft) [Entry date 03/27/03]
3/31/03	312	Answer Brief Filed by ArthroCare Corp. [272-1] motion to Strike the Expert Reports of Creighton G. Hoffman and Elliott H. Leitman - Reply Brief due 4/7/03 (ft) [Entry date 04/01/03]
3/31/03	313	CERTIFICATE OF SERVICE by ArthroCare Corp. re supplemental rebuttal expert report of Charles E. Van Horn (ft) [Entry date 04/01/03]
3/31/03	314	MOTION by ArthroCare Corp. with Proposed Order for Timothy E. DeMasi to Appear Pro Hac Vice (ft) [Entry date 04/01/03]

3/31/03	315	MOTION by Smith & Nephew Inc. with Proposed Order for Karen I. Boyd, Esquire to Appear Pro Hac Vice (ft) [Entry date 04/01/03]
4/1/03	316	MOTION by ArthroCare Corp. in Limine to exclude the testimony of Smith & Nephew's Patent Law Expert, Ronald L. Panitch Answer Brief due 4/8/03 re: [316-1] motion (ft) [Entry date 04/02/03]
4/1/03	317	MOTION by ArthroCare Corp. in Limine to preclude Smith & Nephew from relying on any undisclosed facts or defenses Answer Brief due 4/8/03 re: [317-1] motion (ft) [Entry date 04/02/03]
4/1/03	318	UNOPPOSED MOTION by ArthroCare Corp. in Limine to preclude Smith & Nephew from referring to injunctive relief that may be sought as a result of a finding of infringement re: [318-1] motion (ft) [Entry date 04/02/03]
4/1/03	319	MOTION by ArthroCare Corp. in Limine to preclude Smith & Nephew from referring to a purported control RF Settlement Agreement Answer Brief due 4/8/03 re: [319-1] motion (ft) [Entry date 04/02/03]
4/1/03	320	MOTION by ArthroCare Corp. in Limine to preclude Smith & Nephew from referring to Arthrocare's withdrawal of certain claims Answer Brief due 4/8/03 re: [320-1] motion (ft) [Entry date 04/02/03]
4/1/03	321	MOTION by ArthroCare Corp. in Limine to preclude Smith & Nephew from referring to Judge Orrick's December 1, 1998 interlocutory decision in the Ethicon case Answer Brief due 4/8/03 re: [321-1] motion (ft) [Entry date 04/02/03]
4/1/03	322	MOTION by ArthroCare Corp. in Limine to try inequitable conduct to the Court and to preclude Smith & Nephew from raising issues of inequitable conduct before the jury Answer Brief due 4/8/03 re: [322-1] motion (ft) [Entry date 04/02/03]
4/1/03	323	MOTION by ArthroCare Corp. in Limine that Smith & Nephew's indefiniteness defenses not be presented to the jury Answer Brief due 4/8/03 re: [323-1] motion (ft) [Entry date 04/02/03]
4/1/03	324	SEALED MOTION by ArthroCare Corp. in Limine to preclude Smith & Nephew from referring to its antitrust counterclaim or allegedly harmful effects of Arthrocare's RF Devices Answer Brief due 4/8/03 re: [324-1] motion (ft) [Entry date 04/02/03]
4/1/03	325	SEALED MOTION by Smith & Nephew Inc. in Limine 1 of 6 to exclude certain Arthrocare expert testimony Answer Brief due 4/8/03 re: [325-1] motion (ft) [Entry date 04/02/03]
4/1/03	326	SEALED MOTION by Smith & Nephew Inc. in Limine 2 of 6 to exclude certain evidence related to Arthrocare's products Answer Brief due 4/8/03 re: [326-1] motion (ft)

		[Entry date 04/02/03]
4/1/03	327	SEALED MOTION by Smith & Nephew Inc. in Limine 3 of 6 to exclude evidence of the reexamination of the '536 patent-in-suit Answer Brief due 4/8/03 re: [327-1] motion (ft) [Entry date 04/02/03] [Edit date 04/02/03]
4/1/03	328	SEALED MOTION by Smith & Nephew Inc. in Limine 4 of 6 to exclude certain evidence related to licensing Answer Brief due 4/8/03 re: [328-1] motion (ft) [Entry date 04/02/03]
4/1/03	329	SEALED MOTION by Smith & Nephew Inc. in Limine 5 of 6 to exclude certain Smith & Nephew documents Answer Brief due 4/8/03 re: [329-1] motion (ft) [Entry date 04/02/03]
4/1/03	330	SEALED MOTION by Smith & Nephew Inc. in Limine 6 of 6 to exclude evidence related to the control RF product Answer Brief due 4/8/03 re: [330-1] motion (ft) [Entry date 04/02/03]
4/1/03	331	SEALED Answer Brief Filed by Smith & Nephew Inc. [274-1] motion to Strike the Roos Declaration - Reply Brief due 4/8/03 (ft) [Entry date 04/02/03]
4/1/03	--	Oral Argument held; Judge Robinson presiding; Court Rptr. Hawkins; re: sum. jgm. motions (ft) [Entry date 04/03/03]
4/2/03	--	So Ordered granting [314-1] motion for Timothy E. DeMasi to Appear Pro Hac Vice (signed by Judge Sue L. Robinson) Notice to all parties. (ft)
4/2/03	--	So Ordered granting [315-1] motion for Karen I. Boyd, Esquire to Appear Pro Hac Vice (signed by Judge Sue L. Robinson) Notice to all parties. (ft)
4/2/03	332	Letter to Judge Robinson from W. Marsden, Jr. responding to Court's request for an explanation of the length parties' joint claim construction statement (D.I. # 270) (ft) [Entry date 04/03/03]
4/2/03	333	Letter to Judge Robinson from J. Blumenfeld responding to question about the 65-page joint claim construction chart (D.I. #270) (ft) [Entry date 04/03/03]
4/2/03	334	SEALED Letter to Deputy Clerk Tassone from K. Walter, Jr. dated 4/2/03 enclosing replacement pages to motion in limine 4 of 6 (ft) [Entry date 04/03/03]
4/3/03	335	TRANSCRIPT filed; oral argument for dates of 4/1/03; Judge Robinson presiding; Hawkins Reporting Service (ft)
4/7/03	336	SEALED Reply Brief Filed by Smith & Nephew Inc. [272-1] motion to Strike the Expert Reports of Creighton G. Hoffman and Elliott H. Leitman (rd) [Entry date 04/08/03]
4/8/03	337	Answer Brief Filed by Smith & Nephew Inc. [320-1] motion in Limine to preclude Smith & Nephew from referring to Arthrocare's withdrawal of certain claims (ft) [Entry date 04/09/03]

4/8/03	338	Answer Brief Filed by Smith & Nephew Inc. [317-1] motion in Limine to preclude Smith & Nephew from relying on any undisclosed facts or defenses (ft) [Entry date 04/09/03]
4/8/03	339	Answer Brief Filed by Smith & Nephew Inc. [321-1] motion in Limine to preclude Smith & Nephew from referring to Judge Orrick's December 1, 1998 interlocutory decision in the Ethicon case (ft) [Entry date 04/09/03]
4/8/03	340	Answer Brief Filed by Smith & Nephew Inc. [323-1] motion in Limine that Smith & Nephew's indefiniteness defenses not be presented to the jury (ft) [Entry date 04/09/03]
4/8/03	341	SEALED Answer Brief Filed by Smith & Nephew Inc. [324-1] motion in Limine to preclude Smith & Nephew from referring to its antitrust counterclaim or allegedly harmful effects of Arthrocare's RF Devices (ft) [Entry date 04/09/03]
4/8/03	342	Answer Brief Filed by ArthroCare Corp. [325-1] motion in Limine 1 of 6 to exclude certain Arthrocare expert testimony (ft) [Entry date 04/09/03]
4/8/03	343	SEALED Answer Brief Filed by ArthroCare Corp. [326-1] motion in Limine 2 of 6 to exclude certain evidence related to Arthrocare's products (ft) [Entry date 04/09/03]
4/8/03	344	Answer Brief Filed by ArthroCare Corp. [327-1] motion in Limine 3 of 6 to exclude evidence of the reexamination of the '536 patent-in-suit (ft) [Entry date 04/09/03]
4/8/03	345	SEALED Answer Brief Filed by ArthroCare Corp. [328-1] motion in Limine 4 of 6 to exclude certain evidence related to licensing (ft) [Entry date 04/09/03]
4/8/03	346	SEALED Answer Brief Filed by ArthroCare Corp. [329-1] motion in Limine 5 of 6 to exclude certain Smith & Nephew documents (ft) [Entry date 04/09/03]
4/8/03	347	SEALED Answer Brief Filed by ArthroCare Corp. [330-1] motion in Limine 6 of 6 to exclude evidence related to the control RF product (ft) [Entry date 04/09/03]
4/8/03	348	Reply Brief Filed by ArthroCare Corp. [274-1] motion to Strike the Roos Declaration (ft) [Entry date 04/09/03]
4/8/03	349	Answer Brief Filed by Smith & Nephew Inc. [322-1] motion in Limine to try inequitable conduct to the Court and to preclude Smith & Nephew from raising issues of inequitable conduct before the jury (ft) [Entry date 04/09/03]
4/8/03	350	Answer Brief Filed by Smith & Nephew Inc. [316-1] motion in Limine to exclude the testimony of Smith & Nephew's Patent Law Expert, Ronald L. Panitch (ft) [Entry date 04/09/03]
4/8/03	351	Letter to Judge Robinson from W. Marsden, Jr. notifying the Court that Smith & Nephew is not opposing ArthroCare's Motion in limine to preclude Smith & Nephew from referring to purported Control RF Settlement Agreement; Smith & Nephew's Motion in limine 6 of 6 seeks to exclude all evidence relating to the Control RF product; Smith & Nephew

		is not opposing ArthroCare's Unopposed Motion in Limine to preclude Smith & Nephew from referring to Injunctive Relief that may be sought as a result of a finding of infringement (ft) [Entry date 04/09/03]
4/9/03	352	MEMORANDUM OPINION (signed by Judge Sue L. Robinson) copies to: cnsl. (rd)
4/9/03	353	MEMORANDUM ORDER construing the disputed claim language in U.S. Patents '536, '882, and '592 as listed in this order(signed by Judge Sue L. Robinson) copies to: cnsl. (rd)
4/9/03	354	ORDER denying [261-1] motion for Summary Judgment of invalidity based on prior art, denying [259-1] motion for Summary Judgment to enforce the settlement agreement removing control RF product from the case, denying [257-1] motion for Partial Summary Judgment of (1) nonenablement, (2) indefiniteness, and (3) lack of written description, denying [255-1] motion for partial Summary Judgment of non-infringement of U.S. Patents '536, '882, and '592, denying [251-1] motion for Partial Summary Judgment that deft. infringes claim 1 of the '592 patent, denying [249-1] motion for partial Summary Judgment that deft. infringes the asserted claims of the '882 patent, denying [247-1] motion for partial Summary Judgment that the asserted claims of the patents-in-suit are not invalid due to obviousness or based on an alleged on-sale bar or public use (signed by Judge Sue L. Robinson) copies to: cnsl. (rd)
4/9/03	355	Letter to Judge Robinson from J. Blumenfeld re key contested issue in case; whether the Roos '198 patent discloses electrically conductive fluid (ft) [Entry date 04/10/03]
4/10/03	356	ArthroCare's Supplemental Covenant not to sue Smith & Nephew on certain claims of the patents-in-suit (ft) [Entry date 04/11/03]
4/10/03	357	Joint Proposed Preliminary Jury instructions by ArthroCare Corp., Smith & Nephew Inc. (ft) [Entry date 04/11/03]
4/10/03	358	Proposed Voir dire questions by ArthroCare Corp. (ft) [Entry date 04/11/03]
4/10/03	359	Proposed Verdict Sheet filed by ArthroCare Corp. (ft) [Entry date 04/11/03]
4/10/03	360	Joint PRETRIAL ORDER (ft) [Entry date 04/11/03]
4/10/03	364	Proposed Voir dire questions by Smith & Nephew Inc. (rd) [Entry date 04/14/03]
4/10/03	365	Proposed Verdict Sheet filed by Smith & Nephew Inc. (rd) [Entry date 04/14/03]
4/10/03	366	Proposed Jury instructions by ArthroCare Corp., Smith & Nephew Inc. (rd) [Entry date 04/14/03]
4/11/03	361	Letter to Clerk from K. Walter, Jr. enclosing original

		signature page for Declaration of Brian W. Napper (D.I. 308) (rd) [Entry date 04/14/03]
4/11/03	362	Letter to Judge Robinson from K. Walter, Jr. re Mr. Blumenfeld's letter relating to deft.'s opposition to pltf.'s motion in limine to exclude the testimony of R. Panitch (rd) [Entry date 04/14/03]
4/11/03	363	Letter to Clerk from K. Walter, Jr. enclosing replacement page 4 to deft.'s opposition to motion in limine to exclude the testimony of R. Panitch. (rd) [Entry date 04/14/03]
4/14/03	367	MEMORANDUM ORDER denying [330-1] motion in Limine 6 of 6 to exclude evidence related to the control RF product, granting in part, denying in part [329-1] motion in Limine 5 of 6 to exclude certain Smith & Nephew documents, granting [328-1] motion in Limine 4 of 6 to exclude certain evidence related to licensing, denying [327-1] motion in Limine 3 of 6 to exclude evidence of the reexamination of the '536 patent-in-suit, denying [326-1] motion in Limine 2 of 6 to exclude certain evidence related to Arthrocare's products, granting to the extent it relates to to claim const. and the fact that experts are limited by their reports [325-1] motion in Limine 1 of 6 to exclude certain Arthrocare expert testimony, conditionally granting [324-1] motion in Limine to preclude Smith & Nephew from referring to its antitrust counterclaim or allegedly harmful effects of Arthrocare's RF Devices, denying [323-1] motion in Limine that Smith & Nephew's indefiniteness defenses not be presented to the jury, granting [322-1] motion in Limine to try inequitable conduct to the Court and to preclude Smith & Nephew from raising issues of inequitable conduct before the jury, granting [321-1] motion in Limine to preclude Smith & Nephew from referring to Judge Orrick's December 1, 1998 interlocutory decision in the Ethicon case, granting [320-1] motion in Limine to preclude Smith & Nephew from referring to Arthrocare's withdrawal of certain claims, granting [319-1] motion in Limine to preclude Smith & Nephew from referring to a purported control RF Settlement Agreement, granting [318-1] motion in Limine to preclude Smith & Nephew from referring to injunctive relief that may be sought as a result of a finding of infringement, granting [317-1] motion in Limine to preclude Smith & Nephew from relying on any undisclosed facts or defenses, granting [316-1] motion in Limine to exclude the testimony of Smith & Nephew's Patent Law Expert, Ronald L. Panitch, granting [274-1] motion to Strike the Roos Declaration, denying [272-1] motion to Strike the Expert Reports of Creighton G. Hoffman and Elliott H. Leitman denying [198-1] motion to Compel Ethicon, Inc. to comply with subpoena Duces Tecum and Ad Testificandum (signed by Judge Sue L. Robinson) copies to: cnsl. (rd) [Edit date 04/14/03]
4/14/03	368	MEMORANDUM by ArthroCare Corp. Objections to Deft.'s Trial Exhibits (rd)
4/14/03	369	Letter to Clerk from K. Walter, Jr. enclosing D.I. 370 for filing. (rd)
4/14/03	370	MEMORANDUM by Smith & Nephew Inc. Objecting to Pltf.'s

		Trial Exhibit List. (rd)
4/15/03	--	Pre-trial conference held; Judge Robinson presiding; Court Rptr. V. Gunning (ft) [Entry date 04/16/03]
4/16/03	371	TRANSCRIPT filed [0-0] pre-trial conference for dates of 4/15/03; Judge Robinson presiding; crt. rptr. V. Gunning (rd) [Entry date 04/22/03]
4/23/03	372	Letter to Judge Robinson from J. Blumenfeld enclosing lists of companies, attorneys and law firms, witnesses and subject areas for the voir dire (ft) [Entry date 04/24/03]
4/23/03	373	Letter to Judge Robinson from W. Marsden, Jr. re clarification of 4/9/03 Memorandum Opinion and Order (ft) [Entry date 04/24/03]
4/25/03	374	Letter to Judge Robinson from J. Blumenfeld re request for clarification by Smith & Nephew (ft)
4/28/03	375	Letter to Judge Robinson from K. Walter, Jr. informing the Court of Smith & Newphew's continued efforts to simplify the trial and some disputes have arisen in connection with efforts; request a teleconference at earliest convenience (ft)
4/28/03	376	Letter to Judge Robinson from K. Jacobs Louden enclosing Order dismissing with prejudice Smith & Nephew's declaratory jgm. counterclaim for invalidity due to obviousness (ft)
4/28/03	377	Letter to Judge Robinson from J. Blumenfeld re evidentiary issues (ft)
4/28/03	378	Letter to Judge Robinson from K. Jacobs Louden requesting a sentence be added to the end of paragraph 1 on page 2 of the preliminary jury instructions (ft)
4/28/03	379	Letter to Judge Robinson from W. Marsden, Jr. requesting that the Court issue an order requiring ArthroCare to bring its in-house counsel and vice president John Raffle to testify at trial (ft)
4/28/03	380	SEALED Letter to Court Dated 4/28/03 (ft)
4/29/03	381	Letter to Judge Robinson from J. Blumenfeld responding to deft.'s letter of 4/28/03 req. court to order pltf.'s in house cnsl., John Raffle, to testify at trial. (rd)
4/29/03	382	SEALED Letter to Judge Robinson from William Marsden, Jr. (rd)
4/29/03	--	Deadline updated; set Telephone Conference for 4:00 4/29/03 (rd)
4/29/03	383	Letter to Judge Robinson from K. Walter, Jr. responding to pltf.'s letter of 4/28/03 adding a proposed instruction on reexamination to the preliminary jury instr. (rd)
4/29/03	--	Tele-conference held; Judge Robinson presiding; crt.

		rptr. B. Gaffigan present. (rd) [Entry date 05/01/03]
4/30/03	384	Voir dire to the Jury Panel (ft)
4/30/03	385	Preliminary Jury instructions (ft)
4/30/03	386	Letter to Judge Robinson from W. Marsden, Jr. re Smith & Nephew's request to preclude ArthroCare from referring to, or offering any evidence at trial related to nonobviousness, particularly any evidence or argument related to secondary considerations of nonobviousness (ft)
4/30/03	--	Jury trial held DAY 1; Judge Robinson presiding; Court Rptrs K. Maurer/B. Gaffigan; Jury Selection and Instruction (ft)
4/30/03	387	Letter to Judge Robinson from W. Marsden, Jr. requesting reconsideration of ruling this morning that ArthroCare may introduce evidence of Smith & Nephew's alleged copying of the ArthroCare devices (ft) [Entry date 05/01/03]
4/30/03	388	Steno Notes for 4/30/03 Jury Trial; Judge Robinson presiding; Court Rptr. B. Gaffigan (ft) [Entry date 05/01/03]
4/30/03	389	Steno Notes for 4/29/03 teleconference; Judge Robinson presiding; Court Rptr. B. Gaffigan (ft) [Entry date 05/01/03]
4/30/03	390	TRANSCRIPT filed [0-0] telephone conference for dates of 4/29/03; Judge Robinson presiding; crt. rptr. B. Gaffigan (rd) [Entry date 05/01/03]
5/1/03	--	Jury trial held DAY 2; Judge Robinson presiding; Court Rptr V. Gunning (ft)
5/2/03	--	Jury trial held DAY 3; Judge Robinson presiding; Court Rptrs. K. Maurer/B. Gaffigan (ft)
5/5/03	391	SEALED Letter to Honorable Sue L. Robinson from Mark J. Hebert (ft) [Edit date 05/05/03]
5/5/03	392	MOTION by ArthroCare Corp. to preclude Dr. Michael Choti from Testifying about the Prior Art Answer Brief due 5/19/03 re: [392-1] motion (ft)
5/5/03	393	MOTION by ArthroCare Corp. to preclude Dr. Kim Manwaring from testifying about the Codman ME2 and a new report produced on May 4, 2003 Answer Brief due 5/19/03 re: [393-1] motion (ft)
5/5/03	394	Steno Notes for 5/2/03; daily notes; Judge Robinson presiding; Jury Trial; crt. rptr. B. Gaffigan (rd)
5/5/03	--	Jury trial held DAY 4; Judge Robinson presiding; Court Rptr. V. Gunning; D.I. # 392 is denied and D.I. # 393 is granted in part and denied in part per trial ruling by Judge Robinson (ft)
5/5/03	--	So Ordered (Judge Robinson Ruled In Court During Trial)

		granting in part, denying in part [393-1] motion to preclude Dr. Kim Manwaring from testifying about the Codman ME2 and a new report produced on May 4, 2003, denying [392-1] motion to preclude Dr. Michael Choti from Testifying about the Prior Art (ft) [Entry date 05/06/03]
5/6/03	--	Jury trial held DAY 5; Judge Robinson presiding; Court Rptrs. K. Maurer/B. Gaffigan (ft)
5/6/03	395	Letter to Judge Robinson from J. Parrett, Jr. enclosing parties' proposed jury instructions in hard copy and on disk. (rd)
5/6/03	396	Proposed Jury instructions by ArthroCare Corp., Smith & Nephew Inc. (rd)
5/7/03	397	Steno Notes for 5/6/03 Daily Notes of Jury Trial; B. Gaffigan (rd)
5/7/03	--	Jury trial held DAY 6; Judge Robinson presiding; Court Rptr. V. Gunning; Deft. moves under Rule 50; Judge Robinson reserves jgm. (ft)
5/8/03	398	ORDER directing Clerk of the court to furnish lunch for 8 jurors on May 1 and 2, 2003 (signed by Judge Sue L. Robinson) copies to: financial admin. (rd)
5/8/03	--	Jury trial held DAY 7; Judge Robinson presiding; Court Rptrs. K. Maurer/ B. Gaffigan present (ft)
5/9/03	399	Steno Notes for 5/8/03; Daily Jury Trial Note; crt. rptr. B. Gaffigan (rd)
5/9/03	400	SEALED MOTION by Smith & Nephew Inc. Rule 50(A) for Judgment as a Matter of Law Answer Brief due 5/23/03 re: [400-1] motion (rd)
5/9/03	401	ORDER directing Clerk of the court to furnish lunch for eight (8) jurors from 5/5-9/03(signed by Judge Sue L. Robinson) copies to: Financial Admin. (rd)
5/9/03	402	MOTION by ArthroCare Corp. for Judgment as a Matter of Law Under F.R.C.P. 50(a) Answer Brief due 5/23/03 re: [402-1] motion (rd)
5/9/03	403	ArthroCare Corp.'s Revised Supplemental Convenant not to sue Smith & Nephew on certain claims of the patents-in-suit (rd)
5/9/03	--	Jury trial held DAY 8; Judge Robinson presiding; Court Rptr. V. Gunning present; Deft renews Rule 50 motion; Pltf's Rule 50 Motion; Judge Robinson reserves jgm. (ft)
5/9/03	406	Proffer of Evidence of Warren P. Heim (rd) [Entry date 05/13/03]
5/9/03	407	Proffer of Evidence of Kim H. Manwaring (rd) [Entry date 05/13/03]
5/12/03	404	Jury Charge (rd)

5/12/03	405	JURY VERDICT for ArthroCare Corp.; finding of infringement by Smith & Nephew on the '536, '882, and '592 patents; finding of no invalidity of the '536, '882, '592 patents (ft)
5/12/03	--	Jury trial held DAY 9; Judge Robinson presiding; Court Rptrs. K. Maurer and B. Gaffigan present; Jury deliberation and verdict (ft)
5/12/03	--	Mooting [402-1] motion for Judgment as a Matter of Law Under F.R.C.P. 50(a), mooting [400-1] motion Rule 50(A) for Judgment as a Matter of Law per Jury Verdict (ft) [Entry date 06/11/03]
5/13/03	408	Steno Notes for 5/12/03; Daily Notes; final day; jury verdict; crt. rptr. B. Gaffigan (rd)
5/13/03	409	TRANSCRIPT filed [0-0] jury trial for dates of 4/30/03; Judge Robinson presiding; Daily Copy; volume A. (rd) [Edit date 05/13/03]
5/13/03	410	TRANSCRIPT filed [0-0] jury trial for dates of 5/1/03; Judge Robinson presiding; Daily Copy; Volume B (rd) [Edit date 05/13/03]
5/13/03	411	TRANSCRIPT filed [0-0] jury trial for dates of 5/2/03; Judge Robinson presiding; Daily copy; Volume C. (rd) [Edit date 05/13/03]
5/13/03	412	TRANSCRIPT filed [0-0] jury trial for dates of 5/5/03; Judge Robinson presiding; Daily Copy; Volume D. (rd) [Edit date 05/13/03]
5/13/03	413	SEALED TRANSCRIPT filed [0-0] jury trial for dates of 5/5/03; Judge Robinson presiding; Volume "DD" (rd)
5/13/03	414	TRANSCRIPT filed [0-0] jury trial for dates of 5/6/03; Judge Robinson presiding; Daily copy; Volume E (rd)
5/13/03	415	TRANSCRIPT filed [0-0] jury trial for dates of 5/7/03; Judge Robinson presiding; Daily Copy; Volume F (rd)
5/13/03	416	TRANSCRIPT filed [0-0] jury trial for dates of 5/8/03; Judge Robinson presiding; Daily copy; Volume G (rd)
5/13/03	417	TRANSCRIPT filed [0-0] jury trial for dates of 5/9/03; Judge Robinson presiding; Daily Copy; Volume H (rd)
5/13/03	418	TRANSCRIPT filed [0-0] jury trial for dates of 5/12/03; Judge Robinson presiding; Daily copy; Volume I (rd)
5/14/03	419	Letter to Judge Robinson from K. Walter re briefing schedule for inequitable conduct (rd) [Entry date 05/15/03]
5/16/03	420	Letter to Judge Robinson from J. Blumenfeld responding to deft.'s letter of 5/14/03 re post-trial briefing. (rd) [Entry date 05/20/03]
5/19/03	421	Steno Notes for 4/30/03 through 5/12/03; Daily Notes of

		Jury Trial; Judge Robinson presiding; crt. rptr. K. Maurer (rd) [Entry date 05/20/03]
5/19/03	423	Letter to Judge Robinson from W. Marsden responding to Mr. Blumenfeld's letter of 5/16/03 re deft.'s inequitable conduct defense. (rd) [Entry date 05/21/03]
5/20/03	422	ORDER directing the USMS to furnish lunch for eight jurors and one CSO during their deliberations on 5/12/03 (signed by Judge Sue L. Robinson) copies to: Financial Admin. (rd)
5/20/03	424	MOTION by ArthroCare Corp. for Permanent Injunction Answer Brief due 6/3/03 re: [424-1] motion (rd) [Entry date 05/21/03]
5/20/03	425	SEALED Opening Brief Filed by ArthroCare Corp. [424-1] motion for Permanent Injunction (rd) [Entry date 05/21/03]
5/20/03	426	Letter to Judge Robinson from J. Blumenfeld re inequitable conduct defense. (rd) [Entry date 05/21/03]
5/20/03	427	MOTION by ArthroCare Corp. for Entry of Judgment of no Inequitable Conduct Answer Brief due 6/3/03 re: [427-1] motion (rd) [Entry date 05/21/03]
5/20/03	428	Opening Brief Filed by ArthroCare Corp. [427-1] motion for Entry of Judgment of no Inequitable Conduct (rd) [Entry date 05/21/03]
5/27/03	429	MOTION by ArthroCare Corp. to Dismiss Deft.'s Antitrust Counterclaim Answer Brief due 6/10/03 re: [429-1] motion (rd) [Entry date 05/28/03]
5/27/03	430	Opening Brief Filed by ArthroCare Corp. [429-1] motion to Dismiss Deft.'s Antitrust Counterclaim (rd) [Entry date 05/28/03]
5/28/03	--	Deadline updated; set Telephone Conference for 3:30 6/9/03 per filing of D.I. 419 (rd)
5/29/03	431	Letter to Deputy Clerk DiMeo from K. Walter confirming teleconf. for 6/9/03 at 3:30 p.m.; cnsl. for all parties including Ethicon will be present. (rd) [Entry date 05/30/03]
5/29/03	432	SEALED MOTION by Smith & Nephew Inc. to Modify Protective Order Answer Brief due 6/12/03 re: [432-1] motion (ft) [Entry date 06/02/03]
5/30/03	433	SEALED Declaration of Keith A. Walter, Jr. in support of D.I. # 432 (ft) [Entry date 06/02/03]
5/30/03	434	Letter to Judge Robinson from J. Blumenfeld re scheduling matters which ArthroCare would like to put on the agenda for the telephone conf. on 6/9/03 at 3:30 p.m. (ft) [Entry date 06/03/03]
6/3/03	435	SEALED Answer Brief Filed by ArthroCare Corp. [432-1] motion to Modify Protective Order - Reply Brief due 6/10/03 (ft) [Entry date 06/04/03]

6/4/03	436	SEALED Answer Brief Filed by Smith & Nephew Inc. [424-1] motion for Permanent Injunction - Reply Brief due 6/11/03 (ft) [Entry date 06/05/03]
6/4/03	437	COMBINED CROSS MOTION by Smith & Nephew Inc. to Strike [427-1] motion for Entry of Judgment of no Inequitable Conduct AND ANSWER BRIEF to Motion for entry of jgm of no inequitable conduct (ft) [Entry date 06/05/03]
6/4/03	--	2nd Part of DI # 437; COMBINED Answer Brief Filed by Smith & Nephew Inc. [427-1] motion for Entry of Judgment of no Inequitable Conduct - Reply Brief due 6/11/03 and CROSS MOTION to strike ArthroCare's Motion for Entry of Jgm of No Inequitable Conduct (ft) [Entry date 06/05/03] [Edit date 06/05/03]
6/6/03	438	Letter to Judge Robinson from K. Walter responding to Mr. Blumenfeld's 5/30/03 letter concerning the scheduling matters which ArthroCare would like to put on the agenda for the telephone conf. on 6/9/03 (D.I. # 430); would like to address its pending motion to modify the stipulated protective order (ft) [Entry date 06/09/03]
6/6/03	439	SEALED Reply Brief Filed by Smith & Nephew Inc. [432-1] motion to Modify Protective Order (ft) [Entry date 06/09/03]
6/9/03	440	Letter to Judge Robinson from J. Blumenfeld re follow up on proposed agenda for the conference this afternoon and Smith & Nephew's 6/6 response (ft)
6/9/03	441	COMBINED Reply Brief Filed by ArthroCare Corp. [427-1] motion for Entry of Judgment of no Inequitable Conduct and Answer Brief to Smith & Nephew's counter motion to strike (ft)
6/9/03	--	2nd Part of D.I. # 441; Answer Brief Filed by ArthroCare Corp. [437-1] cross motion to Strike [427-1] motion for Entry of Judgment of no Inequitable Conduct - Reply Brief due 6/16/03 and Reply brief in support of Motion for Jgm of no inequitable conduct; SEE D.I. # 441 for document (ft)
6/9/03	442	Opening brief by Smith & Nephew Inc. in support of its inequitable conduct case (ft) [Entry date 06/10/03]
6/9/03	443	SEALED Declaration of William J. Marsden, Jr. in support of Smith & Nephew's opening brief in support of its inequitable conduct case (D.I. # 442) (ft) [Entry date 06/10/03]
6/9/03	--	Tele-conference held; Judge Robinson presiding; crt. rptr. B. Gaffigan; re post-trial briefing (rd) [Entry date 06/11/03]
6/10/03	444	SEALED Steno Notes for 6/9/03 Teleconf.; Judge Robinson presiding; court rptr. B. Gaffigan (ft)
6/10/03	445	Letter to Judge Robinson from K. Jacobs Louden re reply brief; ArthroCare will not file a reply brief in support of

		its motion for a permanent injunction (D.I. # 424) pending the filing of post-trial motions (ft) [Entry date 06/11/03]
6/10/03	446	Letter to Clerk from W. Marsden, Jr. enclosing original signature page for Declaration of Dr. Roy A. Majors attached as Exhibit D to D.I. # 436; replace the faxed version previously submitted with the enclosed original (ft) [Entry date 06/11/03]
6/11/03	--	Deadline updated; set Oral Argument for 3:30 9/15/03 set in court on 6/9/03 (rd)
6/11/03	447	TRANSCRIPT filed [0-0] telephone conference for dates of 6/9/03; Judge Robinson presiding; Court Rptr. B. Gaffigan (ft)
6/11/03	448	SEALED TRANSCRIPT filed [0-0] telephone conference for dates of 6/9/03; Judge Robinson presiding; court rptr. B. Gaffigan (ft)
6/12/03	--	Due to a clerical error, there is no D.I. # 449 (ft) [Entry date 06/20/03]
6/16/03	450	MOTION by Smith & Nephew Inc. with Proposed Order for Alan H. Blankenheimer, Esquire to Appear Pro Hac Vice (ft) [Entry date 06/17/03]
6/16/03	451	Letter to Judge Robinson from W. Marsden, Jr. re post-trial motion practice; Smith & Nephew will not file any further briefing on D.I. # 427 and D.I. # 437; understand these motions are now moot and the parties will brief the issue of inequitable conduct according to the schedule set during the teleconf. (ft) [Entry date 06/17/03]
6/18/03	--	So Ordered granting [450-1] motion for Alan H. Blankenheimer, Esquire to Appear Pro Hac Vice (signed by Judge Sue L. Robinson) Notice to all parties. (rd)
6/20/03	452	JUDGMENT for ArthroCare Corp. against Smith & Nephew Inc. (signed by Judge Sue L. Robinson) copies to: cnsl. (rd)
6/26/03	453	Expedited MOTION by Smith & Nephew Inc. with Proposed Order for Leave to extend page limits for briefing on Smith & Nephew's Motion for Jgm. as a matter of law Answer Brief due 7/10/03 re: [453-1] motion (ft)
6/27/03	454	Answer Brief Filed by ArthroCare Corp. [453-1] expedited motion for Leave to extend page limits for briefing on Smith & Nephew's Motion for Jgm. as a matter of law - Reply Brief due 7/7/03 (ft)
6/30/03	--	So Ordered denying [453-1] motion for Leave to extend page limits for briefing on Smith & Nephew's Motion for Jgm. as a matter of law (signed by Judge Sue L. Robinson) Notice to all parties. (ft)
6/30/03	455	MOTION by Smith & Nephew Inc. with Proposed Order for New Trial Answer Brief due 7/14/03 re: [455-1] motion (ft) [Entry date 07/01/03]

6/30/03	456	SEALED Opening Brief Filed by Smith & Nephew Inc. [455-1] motion for New Trial (ft) [Entry date 07/01/03]
6/30/03	457	SEALED Declaration of William J. Marsden, Jr. in support of D.I. # 456 (ft) [Entry date 07/01/03]
6/30/03	458	Renewal of MOTION by Smith & Nephew Inc. with Proposed Order for Judgment as a Matter of Law pursuant to Fed R. Civ. P. 50(b) Answer Brief due 7/14/03 re: [458-1] motion (ft) [Entry date 07/01/03]
6/30/03	459	Opening Brief Filed by Smith & Nephew Inc. [458-1] motion for Judgment as a Matter of Law pursuant to Fed R. Civ. P. 50(b) (ft) [Entry date 07/01/03]
6/30/03	460	SEALED Declaration of William J. Marsden, Jr. in support of D.I. # 459 (ft) [Entry date 07/01/03]
7/1/03	461	Letter to Judge Robinson from W. Marsden, Jr. re expedited request to extend the page limits for briefing (ft)
7/9/03	462	Answering Brief by ArthroCare Corp. in opposition to [442-1] Opening Brief in support of its inequitable conduct case (ft) [Entry date 07/10/03]
7/11/03	463	Letter to Clerk from K. Jacobs Louden enclosing ArthroCare's Corrected answering brief in opposition to Smith & Newphew's Opening brief in support of its inequitable conduct case; Corrected Version of D.I. # 462 (ft) [Entry date 07/15/03] [Edit date 07/15/03]
7/18/03	--	Exit final jgm. to Commissioner of Patents and Trademarks, Washington, D.C. (rd) [Entry date 07/21/03]
7/24/03	464	SEALED Reply Brief Filed by Smith & Nephew Inc. in support of its inequitable conduct case (ft)
7/24/03	465	SEALED Declaration of Keith A. Walter, Jr. in support of Smith & Nephew, Inc.'s reply brief in support of its inequitable conduct case (D.I. # 464) (ft)
7/30/03	466	Answer Brief Filed by ArthroCare Corp. [455-1] motion for New Trial - Reply Brief due 8/6/03 (ft) [Entry date 07/31/03]
7/30/03	467	Answer Brief Filed by ArthroCare Corp. [458-1] motion for Judgment as a Matter of Law pursuant to Fed R. Civ. P. 50(b) - Reply Brief due 8/6/03 (ft) [Entry date 07/31/03]

END OF DOCKET: 1:01cv504

PACER Service Center

Transaction Receipt

08/04/2003 15:26:19			
PACER L gin:	mn0009	**Client C de:**	
Descripti n:	docket report	**Search Criteria:**	1:01cv00504
Billable Pages:	48	**C st:**	3.36

IN THE UNITED STATES DISTRICT COURT

FOR THE DISTRICT OF DELAWARE

ARTHROCARE CORPORATION, Plaintiff, v. SMITH & NEPHEW, INC., Defendant.	C.A. No. 01-504 SLR

DEFENDANT SMITH & NEPHEW, INC.'S SUPPLEMENTAL RESPONSES TO PLAINTIFF ARTHROCARE CORPORATION'S INTERROGATORIES NOS. 4 AND 5

Smith & Nephew, Inc. ("Smith & Nephew") supplements its answers and objections to ArthroCare Corporation's ("ArthroCare") First Set of Interrogatories [Nos. 1-7] as follows:

GENERAL OBJECTIONS

1. Smith & Nephew objects to the definitions and instructions and to each interrogatory to the extent they are inconsistent with and more burdensome than the Federal Rules of Civil Procedure, the Delaware Local Rules and the orders of this Court. For example, Smith & Nephew objects to Instruction No. 11 as inconsistent with and more burdensome than the applicable rules and orders governing claims of privilege and work product for interrogatory responses. Smith & Nephew will comply with the Federal Rules of Civil Procedure, the Delaware Local Rules and the orders of this Court.

2. Smith & Nephew objects to each interrogatory to the extent it seeks disclosure of information protected by the attorney-client privilege, work product doctrine, or other applicable privilege or immunity. Any disclosure Smith & Nephew makes of such information is

inadvertent and does not constitute a waiver of the applicable privilege or immunity as to such information.

3. Smith & Nephew objects to each interrogatory to the extent it seeks disclosure of confidential information, until such time that a suitable protective order is entered in this case. It is expected that the parties will be able to agree to the terms of such a protective order without assistance from the Court, which will, *inter alia*, specify how confidential information is to be designated. Smith & Nephew is in the process of drafting a suitable protective order, which will be provided shortly. Smith & Nephew also objects to disclosing information that Smith & Nephew is obligated to third parties to maintain as confidential. Smith & Nephew will seek the permission of such third parties to disclose such information, once a suitable protective order is entered.

4. Smith & Nephew objects that the definition of "ArthroCare" is vague. Smith & Nephew will respond on the basis that the term "ArthroCare" is understood to refer to the plaintiff in this action, ArthroCare Corp., and its employees and agents.

5. Smith & Nephew objects that the definition of "Defendant," "Smith & Nephew," "You," and "Your" is vague and overbroad, and seeks irrelevant information not related to any claim or defense in this action. The only Smith & Nephew business unit that is involved in making and selling the accused product is the Endoscopy Division of Smith & Nephew. Accordingly, Smith & Nephew will respond on the basis that the terms "Defendant," "Smith & Nephew," "You," and "Your" are understood to mean Smith & Nephew's Endoscopy Division.

6. Smith & Nephew objects that the definition of "Relates To," "Relating To," "In Relation To," and "Related To" is overbroad, unduly burdensome, and seeks irrelevant information not related to any claim or defense in this action. Smith & Nephew will interpret these terms as meaning "constituting, containing, referring to, describing, analyzing, and discussing" and their cognates to "Relates To" and "Related To."

7. Smith & Nephew objects that the definition of "identify" is overbroad and unduly burdensome. Rather than provide the information requested, where an interrogatory asks that Smith & Nephew "identify" an individual, Smith & Nephew may instead provide sufficient information from which ArthroCare can contact the individual; where an interrogatory asks that Smith & Nephew "identify" a document, Smith & Nephew may instead produce the document and/or provide the production number range for the document.

8. Smith & Nephew objects that the definition of "Accused Device" is overbroad and unduly burdensome and seeks irrelevant information not related to any claim or defense in this action. The only products falling within ArthroCare's definition of "Accused Device" which have been introduced to the marketplace are the Dyonics Control RF Adaptor and the Dyonics Series 7000 RF RS Probe. Accordingly, Smith & Nephew will respond on the basis that the term "Accused Device" is understood to mean only the Dyonics Control RF Adaptor and the Dyonics Series 7000 RF RS Probe.

9. In accordance with Local Rule 26.1(b), Smith & Nephew shall count each subpart as a separate interrogatory. Smith & Nephew notes that ArthroCare's First Set of Interrogatories has numerous subparts, each of which comprises a separate interrogatory under the Federal Rules of Civil Procedure. Smith & Nephew objects to ArthroCare serving more than 35 interrogatories, thereby violating the agreed upon Scheduling Order. In order to expedite discovery, Smith & Nephew has not undertaken the task of enumerating each separate subpart contained within ArthroCare's interrogatories. If ArthroCare propounds additional interrogatories, however, Smith & Nephew will undertake such a task to ensure that ArthroCare does not exceed the numerical limit imposed by the Scheduling Order.

10. Discovery and analysis are ongoing in this case. Smith & Nephew reserves the right to supplement its responses as such discovery and analysis make necessary.

INTERROGATORY NO. 4

State in detail all facts upon which Defendant bases its denial of infringement of any of the Patents-In-Suit, including without limitation the Identity of the individuals with knowledge of any such facts and the Identity of all Documents and things Relating To any such facts.

RESPONSE TO INTERROGATORY NO. 4

In addition to the General Objections, Smith & Nephew also objects to this interrogatory to the extent it seeks information protected by attorney-client privilege and/or work product immunity. Smith & Nephew further objects to this interrogatory as overly broad and premature contention discovery: discovery in the case has just begun, there are more than 160 claims in the patents-in-suit, and only recently, i.e., on November 2, 2001, did ArthroCare disclose the identity of certain independent claims it is asserting, and even then, ArthroCare's claim designation was indicated to be tentative. ArthroCare still has not disclosed the identity of the dependent claims it is asserting despite having been asked to do so several times by Smith & Nephew. Accordingly, Smith & Nephew objects to ArthroCare's attempts to take contention discovery in such a piecemeal fashion.

Further answering, Smith & Nephew notes that in its interrogatories served on October 10, 2001, and in particular in Interrogatory Nos. 1-3, Smith & Nephew asked ArthroCare to identify the asserted claims and to provide its contentions as to claim construction. ArthroCare has requested an extension until December 10, 2001 to respond to these interrogatories. Accordingly, Smith & Nephew reserves its right to supplement its response to this interrogatory once ArthroCare answers Smith & Nephew's interrogatories, and as discovery proceeds.

SUPPLEMENTAL RESPONSE TO INTERROGATORY NO. 4

In addition to the information provided in response to this interrogatory and subject to and without waiving the general and specific objections therein, and based on the information currently available to it, Smith & Nephew supplements its response as follows: Smith & Nephew further objects to this interrogatory as being premature in light of the current status of this case, as discovery has just begun, ArthroCare has produced almost no confidential documents to Smith & Nephew, expert discovery in this case has not begun, and initial expert reports are not due until September 13, 2002.

Smith & Nephew also objects to this interrogatory on the grounds that ArthroCare has improperly refused to respond to Smith & Nephew's interrogatory requesting that ArthroCare identify how the asserted claims of the patents-in-suit should be construed on the grounds that any interrogatory requesting such information is purportedly superseded by the Court's scheduling order in this case. Arthrocare is wrong. The court's decision to set a date for exchange of final claim construction contentions does not relieve Arthrocare of its responsibility to timely respond to relevant discovery directed to Arthrocare's claim construction contentions. As clearly set forth in Smith & Nephew's initial response, Smith & Nephew indicated that it would supplement its response to this interrogatory once ArthroCare provided its contentions as to claim construction as requested in Smith & Nephew's interrogatories. However, ArthroCare has refused to do so. Smith & Nephew further objects to this interrogatory on the grounds that ArthroCare has failed to meaningfully respond to Smith & Nephew's interrogatory seeking ArthroCare's infringement contentions. It is manifestly unfair, as well as nonsensical since ArthroCare bears the burden of proof on the issue, for ArthroCare to demand Smith & Nephew's

non-infringement contentions without first providing meaningful responses to Smith & Nephew's interrogatory seeking ArthroCare's infringement contentions. Accordingly, Smith & Nephew reserves its right to supplement its response to this interrogatory once ArthroCare answers Smith & Nephew's interrogatories, and as discovery proceeds.

INTERROGATORY NO. 5

State in detail all facts upon which Defendant bases its allegation that any of the Patents-In-Suit are invalid, including without limitation the Identity of the individuals with knowledge of any such facts and the Identity of all Documents and things Relating To any such facts.

RESPONSE TO INTERROGATORY NO. 5

In addition to the General Objections, Smith & Nephew also objects to this interrogatory to the extent it seeks information protected by attorney-client privilege and/or work product immunity. Smith & Nephew further objects to this interrogatory as overly broad and premature contention discovery: discovery in the case has just begun, there are more than 160 claims in the patents-in-suit, and only recently, i.e., on November 2, 2001, did ArthroCare disclose the identity of certain independent claims it is asserting, and even then, ArthroCare's claim designation was indicated to be tentative. ArthroCare still has not disclosed the identity of the dependent claims it is asserting despite having been asked to do so several times by Smith & Nephew. Accordingly, Smith & Nephew objects to ArthroCare's attempts to take contention discovery in such a piecemeal fashion.

Further answering, Smith & Nephew notes that in its interrogatories served on October 10, 2001, and in particular in Interrogatory Nos. 1-3, Smith & Nephew asked ArthroCare to identify the asserted claims and to provide its contentions as to claim construction. In addition, in Interrogatory Nos. 4, 5, 7, and 12, and in its First Request For Production And Things, Smith & Nephew asked ArthroCare to provide certain information regarding the subject matter of this interrogatory. ArthroCare has requested an extension until December 10, 2001 to respond to these interrogatories and requests for production. Accordingly, Smith & Nephew reserves its

right to supplement its response to this interrogatory once ArthroCare provides its responses to Smith & Nephew's interrogatories and requests for production, and as discovery proceeds.

Subject to its objections and without waiving any objection, Smith & Nephew responds as follows:

As of the present time, Smith & Nephew contends that the asserted claims are invalid for at least the same reasons as, and to the same extent as, set forth in Judge Orrick's Memorandum Decision and Order of December 1, 1998 in the case of *Arthrocare Corp. v. Ethicon, Inc.*, Civil Action No. C-98-0609-WHO (N.D. Cal.)

SUPPLEMENTAL RESPONSE TO INTERROGATORY NO. 5

In addition to the information provided in response to this interrogatory and subject to and without waiving the general and specific objections therein, and based on the information currently available to it, Smith & Nephew supplements its response as follows: Smith & Nephew further objects to this interrogatory as being premature in light of the current status of this case, as discovery has just begun, ArthroCare has produced almost no confidential documents to Smith & Nephew, expert discovery in this case has not begun, and initial expert reports are not due until September 13, 2002. Smith & Nephew further objects to this interrogatory on the grounds that ArthroCare has refused to identify how the asserted claims of the patents-in-suit should be construed. Smith & Nephew's discovery and investigation are ongoing. Smith & Nephew reserves the right to supplement and/or modify this response as additional material or information become available.

Subject to these objections, Smith & Nephew states that it may rely on one or more of the following references (or others to be identified later) to support Smith & Nephew's prior art invalidity defenses under 35 U.S.C. §§ 102 and 103 for each of the asserted claims set forth in Jared Bobrow's letter of November 2, 2001. Smith & Nephew is continuing to evaluate the

relevant prior art and, if necessary, will provide additional detail on its contentions at an appropriate later date.

U.S. Patent No. 5,697,536: Claim 45

ISSUE/ PUBLICATION DATE	PATENT NUMBER/ PUBLICATION	INVENTOR/AUTHOR	TITLE
08/16/33	US 2,056,377	F.C. Wappler	Electronic Instrument
05/00/69	Bio-Medical Engineering 206-216	A.K. Dobbie	The Electrical Aspects of Surgical Diathermy
06/11/74	US 3,815,604	Conor C. O'Malley, Ralph M. Heintz, Sr.	Apparatus For Intraocular Surgery
08/26/75	US 3,901,242	Karl Storz	Electric Surgical Instrument
00/00/76	Acta Medicotechnica (Medizinal-Markt), Vol. 24, No. 4, 1976 129 – 134	E. Elsasser and E. Roos	Uber ein Instrument zur leckstromfreien transurethralen Resection (Concerning An Instrument for Transurethral resection without leakage of current)
02/24/76	US 3,939,839	Lawrence E. Curtiss	Resectoscope and Electrode Therefor
01/07/77	2 313 949/ N 76 17587	Siegfried Hiltebrandt et Ludwig Bonnet	Boucle de sectionnement a une ou deux branches pour resertoscope
00/00/78	Gastroenterology, Vol. 74, No. 3, 527-534, 1978	J.R.A. Piercey, M.D., D.C. Auth, Ph.D, P.E., F.E. Silverstein, M.D., H.R. Willard, Ph.D, M.B. Dennis, D.V.M., D.M. Ellefson, B.S., D.M. Davis, M.S.E.E., R.L. Protell, M.D. and C.E. Rubin, M.D.	Electrosurgical Treatment of Experimental Bleeding Canine Gastric Ulcers: Development and testing of a computer control and a better electrode
09/26/78	US 4,116,198	Eberhard Roos	Electro-Surgical Device
11/00/79	Digestive Diseases and Sciences, Vol. 24, No. 11, 845-848	M.B. Dennis, J. Peoples, R. Hulett, D.C. Auth, R.L. Protell, C.E. Rubin, and F.E. Silverstein	Evolution of Electrofulguration in Control of Bleeding of Experimental Gastric Ulcers
01/01/80	US 4,181,131	Hisao Ogiu	High Frequency Electrosurgical Instrument

ISSUE/ PUBLICATION DATE	PATENT NUMBER/ PUBLICATION	INVENTOR/AUTHOR	TITLE
			for Cutting Human Body Cavity Structures
01/22/80	US 4,184,492	Hans H. Meinke, Gerhard Flachenecker, Karl Fastenmeier, Friedrich Landstorfer, Heinz Lidenmeier	Safety Circuitry for High Frequency Cutting and Coagulating Devices
11/11/80	US 4,232,676	Andrew Herczog	Surgical Cutting Instrument
02/03/81	US 4,248,231	Andrew Herczog and James A. Murphy	Surgical Cutting Instrument
02/00/82	CRC Press, American Heart Journal, Vol. 117, 332-341	Kevin J. Barry, MS, Jonathan Kaplan, MD, Raymond J. Connolly, Ph.D, Paul Nardella, BS, Benjamin I. Lee, MD, Gary J. Becker, MD, Bruce F. Waller, MD, and Allan D. Callow, MD, Ph.D	The effect of radiofrequency-generated thermal energy on the mechanical and histologic characteristics of the arterial wall in vivo: Implications for radiofrequency angioplasty
04/27/82	US 4,326,529	James D. Doss and Richard L. Hutson	Corneal-Shaping Electrode
04/26/83	US 4,381,007	James D. Doss	Multipolar Corneal-Shaping Electrode with Flexible Removable Skirt
00/00/85	Urological Research 13:99-102	J.W.A. Ramsay, N.A. Shepherd, M. Butler, P.T. Gosling, R.A. Miller, D.M.A. Wallace, H.N. Whitfield	A Comparison of Bipolar and Monopolar Diathermy Probes in Experimental Animals
06/00/85	JACC Vol. 5, No. 6, 1382-6	Cornelis J. Slager, MSc, Catharina E. Essed, MD, Johan C.H. Schuurbiers, BSc, Nicolaas Bom, Ph.D, Patrick W. Serruys, MD, Geert T. Meester, MD, FACC	Vaporization of Atherosclerotic Plaques by Spark Erosion
05/27/86	US 4,590,934	Jerry L. Malis, Leonard I. Malis, Robert R. Acorcey, David Solt	Bipolar Cutter/Coagulator
06/23/87	US 4,674,499	David S.C. Pao	Coaxial Bipolar Probe
00/00/89	The Organizing	Robert Tucker and	A Bipolar Electrosurgical

ISSUE/ PUBLICATION DATE	PATENT NUMBER/ PUBLICATION	INVENTOR/AUTHOR	TITLE
	Committee of the 7th World Congress on Endourology and ESWL Foundation for Advancement of International Science	Stefan Loening	Turp Loop
02/21/89	US 4,805,616	David S.C. Pao	Bipolar Probes for Ophthalmic Surgery and Methods of Performing Anterior Capsulotomy
03/00/89	Journal of Urology Vol. 141, 662-665	Robert D. Tucker, Eugene V. Kramolowsky, Eric Bedell and Charles E. Platz	A Comparison of Urologic Application of Bipolar Versus Monopolar Five French Electrosurgical Probes
04/00/89	JACC Vol. 13 No. 5, 1167-75	Benjamin I. Lee, MD, FACC, Gary J. Becker, MD, Bruce F. Waller, MD, FACC, Kevin J. Barry, MS, Raymond J. Connolly, Ph.D, Jonathan Kaplan, MD, Alan R. Shapiro, MS, Paul C. Nardella, BS	Thermal Compression and Molding of Atherosclerotic Vascular Tissue With Use of Radiofrequency Energy: Implications for Radiofrequency Balloon Angioplasty
04/25/89	US 4,823,791	Frank D. D'Amelio, Dawn M. DeLemos, Dominick G. Esposito, Michelle D. Maxfield, Claude E. Petruzzi, Robert H. Quint	Electrosurgical Probe Apparatus
00/00/90	Urological Research 18:291-294.	R.D. Tucker, E.V. Kramolowsky, and C.E. Platz	In vivo effect of 5 French bipolar and monopolar electrosurgical probes on the porcine bladder
02/00/90	Journal of Urology Vol. 143, 275-277	Eugene V. Kramolowsky and Robert D. Tucker	Use of 5F Bipolar Electrosurgical Probe in Endoscopic Urologiical Procedures
04/05/90	WO 90/03152	John Considine, John Colin	Electro-surgical Apparatus for Removing Tumours from Hollow Organs of the Body

ISSUE/ PUBLICATION DATE	PATENT NUMBER/ PUBLICATION	INVENTOR/AUTHOR	TITLE
05/01/90	US 4,920,978	David P. Colvin	Method and Apparatus for the Endoscopic Treatment of Deep Tumors Using RF Hyperthermia
06/05/90	US 4,931,047	Alan Broadwin, Charles Vassallo, Joseph N. Logan, Robert W. Hornlein	Method and Apparatus For Providing Enhanced Tissue Fragmentation And/Or Hemostasis
12/11/90	US 4,976,711	David J. Parins, Mark A. Rydell, Peter Stasz	Ablation Catheter With Selectively Deployable Electrodes
12/25/90	US 4,979,948	Lesslie A. Geddes, Marvin H. Hinds, Joe D. Bourland, William D. Voorhees	Method and Apparatus for Thermally Destroying A Layer of An Organ
03/21/91	DE 3930451 A1	Ellen Hoffmann, Gerhard, Steinbeck, Rudi Mattmuller	Vorrichtung für die Hochfrequenzkoagulation von biologischem Gewebe
04/16/91	US 5,007,908	Mark A. Rydell	Electrosurgical Instrument Having Needle Cutting Electrode And Spot-Coag Electrode
04/23/91	US 5,009,656	Harry G. Reimels	Bipolar Electrosurgical Instrument
07/30/91	US 5,035,696	Mark A. Rydell	Electrosurgical Instrument for Conducting Endoscopic Retrograde Sphincterotomy
09/00/91	Journal of Urology Vol. 146, 669	Eugene V. Kramolowsky and Robert D. Tucker	The Urological Application of Electrosurgery
09/10/91	US 5,047,027	Mark A. Rydell	Tumor Resector
10/07/91	Bipolar Laparoscopic Cholecystectomy Lecture	Dr. Olsen	Bipolar Laparoscopic Cholecystectomy
01/14/92	US 5,080,660	Terrence J. Buelna	Electrosurgical Electrode
02/04/92	US 5,085,659	Mark A. Rydell	Biopsy Device With Bipolar Coagulation Capability
02/18/92	US 5,088,997	Louis Delahuerga, Robert B. Stoddard, Michael S. Klicek	Gas Coagulation Device

ISSUE/ PUBLICATION DATE	PATENT NUMBER/ PUBLICATION	INVENTOR/AUTHOR	TITLE
03/24/92	US 5,098,431	Mark A. Rydell	RF Ablation Catheter
05/12/92	US 5,112,330	Shinichi Nishigaki, Shiro Bito	Resectoscope Apparatus
06/16/92	US 5,122,138	Kim H. Manwaring	Tissue Vaporizing Accessory and Method for an Endoscope
12/01/92	US 5,167,659	Naoki Ohtomo; Shizuo Ninomiya	Blood Coagulating Apparatus
12/15/92	US 5,171,311	Mark A. Rydell, David J. Parins, Steven W. Berhow	Percutaneous Laparoscopic Cholectectomy Instrument
05/04/93	US 5,207,675	Jerome Canady	Surgical Coagulation Device
06/08/93	US 5,217,459	William Kamerling	Method and Instrument for Performing Eye Surgery
04/26/94	US 5,306,238	Richard P. Fleenor	Laparoscopic Electrosurgical Pencil
06/13/95	US 5,423,882	Warren M. Jackman, Wilton W. Webster, Jr.	Catheter Having Electrode With Annular Recess and Method of Using Same
10/03/95	US 5,454,809	Michael Janssen	Electrosurgical Catheter And Method For Resolving Artherosclerotic Plaque By Radio Frequency Sparking

In addition, Smith & Nephew may rely on the findings of fact made by Judge William H. Orrick in his Memorandum Decision and Order dated December 1, 1998, in which he found that "every element of claim 45 of the '536 patent . . . appear[s] in the Roos '198 patent." Smith & Nephew may also rely on the file history of U.S. Patent No. 4,116,198.

U.S. Patent No. 5,697,882: Claim 1

ISSUE/ PUBLICATION DATE	PATENT NUMBER/ PUBLICATION	INVENTOR/AUTHOR	TITLE
08/16/33	US 2,056,377	F.C. Wappler	Electronic Instrument
05/00/69	Bio-Medical Engineering 206-216	A.K. Dobbie	The Electrical Aspects of Surgical Diathermy

08/26/75	US 3,901,242	Karl Storz	Electric Surgical Instrument
06/11/74	US 3,815,604	Conor C. O'Malley, Ralph M. Heintz, Sr.	Apparatus For Intraocular Surgery
00/00/76	Acta Medicotechnica (Medizinal-Markt), Vol. 24, No. 4, 1976 129 – 134	E. Elsasser and E. Roos	Uber ein Instrument zur leckstromfreien transurethralen Resection (Concerning An Instrument for transurethral resection without leakage of current)
02/24/76	US 3,939,839	Lawrence E. Curtiss	Resectoscope and Electrode Therefor
07/20/76	US 3,970,088	Charles F. Morrison	Electrosurgical Devices Having Sesquipolar Electrode Structures Incorporated Therein
01/07/77	2 313 949/ N 76 17587	Siegfried Hiltebrandt et Ludwig Bonnet	Boucle de sectionnement a une ou deux branches pour resertoscope
02/21/78	US 4,074,718	Charles F. Morrison, Jr.	Electrosurgical Instrument
09/26/78	US 4,116,198	Eberhard Roos	Electro-Surgical Device
11/00/79	Digestive Diseases and Sciences, Vol. 24, No. 11, 845-848	M.B. Dennis, J. Peoples, R. Hulett, D.C. Auth, R.L. Protell, C.E. Rubin, and F.E. Silverstein	Evolution of Electrofulguration in Control of Bleeding of Experimental Gastric Ulcers
01/01/80	US 4,181,131	Hisao Ogiu	High Frequency Electrosurgical Instrument for Cutting Human Body Cavity Structures
01/22/80	US 4,184,492	Hans H. Meinke, Gerhard Flachenecker, Karl Fastenmeier, Friedrich Landstorfer, Heinz Lidenmeier	Safety Circuitry for High Frequency Cutting and Coagulating Devices
4/27/82	US 4,326,529	James D. Doss and Richard L. Hutson	Corneal-Shaping Electrode
04/26/83	US 4,381,007	James D. Doss	Multipolar Corneal-Shaping Electrode with Flexible Removable Skirt
00/00/84	Gut, 25, 1424-1431	C.P. Swain, TN Mills, E. Shemesh, Julia M. Dark, M.R. Lewin, J.S. Clifton, T.C. Northfield,	Which Electrode? A comparison of four endoscopic methods of electrocoagulation in

		P.B. Cotton, and P.R. Salmon	experimental bleeding ulcers
00/00/85	Urological Research 13:99-102	J.W.A. Ramsay, N.A. Shepherd, M. Butler, P.T. Gosling, R.A. Miller, D.M.A. Wallace, H.N. Whitfield	A Comparison of Bipolar and Monopolar Diathermy Probes in Experimental Animals
06/00/85	JACC Vol. 5, No. 6, 1382-6	Cornelis J. Slager, MSc, Catharina E. Essed, MD, Johan C.H. Schuurbiers, BSc, Nicolaas Bom, Ph.D, Patrick W. Serruys, MD, Geert T. Meester, MD, FACC	Vaporization of Atherosclerotic Plaques by Spark Erosion
10/22/85	US 4,548,207	Harry G. Reimels	Disposable Coagulator
05/27/86	US 4,590,934	Jerry L. Malis, Leonard I. Malis, Robert R. Acorcey, David Solt	Bipolar Cutter/Coagulator
00/00/87	Kardiologie, Kardiol.76: Supp. 6, 67-71 (1987)	C.J. Slager, A.C. Phaff, C.E. Essed, J.C.H. Schuurbiers, N. Bom, V.A. Vandenbroucke, and P.W. Serruys	Spark Erosion of Arteriosclerotic Plaques
4/28/87	US 4,660,571	Stanley R. Hess, Terri Kovacs	Percutaneous Lead Having Radially Adjustable Electrode
06/23/87	US 4,674,499	David S.C. Pao	Coaxial Bipolar Probe
00/00/89	The Organizing Committee of the 7th World Congress on Endourology and ESWL Foundation for Advancement of International Science	Robert Tucker and Stefan Loening	A Bipolar Electrosurgical Turp Loop
00/00/89	SPIE Vol. 1068 Catheter-based Sensing and Imaging Technology	Paul C. Nardella	Radio Frequency Energy and Impedance Feedback
02/21/89	US 4,805,616	David S.C. Pao	Bipolar Probes for Ophthalmic Surgery and Methods of Performing Anterior Capsulotomy
03/00/89	Journal of Urology Vol. 141, 662-665	Robert D. Tucker, Eugene V. Kramolowsky, Eric	A Comparison of Urologic Application of Bipolar Versus Monopolar Five

		Bedell and Charles E. Platz	French Electrosurgical Probes
04/00/89	JACC Vol. 13 No. 5, 1167-75	Benjamin I. Lee, MD, FACC, Gary J. Becker, MD, Bruce F. Waller, MD, FACC, Kevin J. Barry, MS, Raymond J. Connolly, Ph.D, Jonathan Kaplan, MD, Alan R. Shapiro, MS, Paul C. Nardella, BS	Thermal Compression and Molding of Atherosclerotic Vascular Tissue With Use of Radiofrequency Energy: Implications for Radiofrequency Balloon Angioplasty
00/00/90	Urological Research 18:291-294	R.D. Tucker, E.V. Kramolowsky, and C.E. Platz	In vivo effect of 5 French bipolar and monopolar electrosurgical probes on the porcine bladder
02/00/90	Journal of Urology Vol. 143, 275-277	Eugene V. Kramolowsky and Robert D. Tucker	Use of 5F Bipolar Electrosurgical Probe in Endoscopic Urologiical Procedures
04/05/90	WO 90/03152	John Considine, John Colin	Electro-surgical Apparatus for Removing Tumours from Hollow Organs of the Body
06/05/90	US 4,931,047	Alan Broadwin, Charles Vassallo, Joseph N. Logan, Robert W. Hornlein	Method and Apparatus For Providing Enhanced Tissue Fragmentation And/Or Hemostasis
06/26/90	US 4,936,281	Peter Stasz	Ultrasonically Enhanced RF Ablation Catheter
12/11/90	US 4,976,711	David J. Parins, Mark A. Rydell, Peter Stasz	Ablation Catheter With Selectively Deployable Electrodes
12/25/90	US 4,979,948	Lesslie A. Geddes, Marvin H. Hinds, Joe D. Bourland, William D. Voorhees	Method and Apparatus for Thermally Destroying A Layer of An Organ
04/16/91	US 5,007,908	Mark A. Rydell	Electrosurgical Instrument Having Needle Cutting Electrode And Spot-Coag Electrode
04/23/91	US 5,009,656	Harry G. Reimels	Bipolar Electrosurgical Instrument
07/30/91	US 5,035,696	Mark A. Rydell	Electrosurgical Instrument for Conducting Endoscopic Retrograde

			Sphincterotomy
09/00/91	Journal of Urology Vol. 146, 669	Eugéne V. Kramolowsky and Robert D. Tucker	The Urological Application of Electrosurgery
09/10/91	US 5,047,026	Mark A. Rydell	Electrosurgical Implement For Tunneling Through Tissue
09/10/91	US 5,047,027	Mark A. Rydell	Tumor Resector
10/07/91	Bipolar Laparoscopic Cholecystectomy Lecture	Dr. Olsen	Bipolar Laparoscopic Cholecystectomy
01/14/92	US 5,080,660	Terrence J. Buelna	Electrosurgical Electrode
02/18/92	US 5,088,997	Louis Delahuerga, Robert B. Stoddard, Michael S. Klicek	Gas Coagulation Device
03/24/92	US 5,098,431	Mark A. Rydell	RF Ablation Catheter
04/28/92	US 5,108,391	Gerhard Flachenecker, Karl Fastenmeier, Heinz Lindenmeier	High-Frequency Generator For Tissue Cutting And For Coagulating In High-Frequency Surgery
05/12/92	US 5,112,330	Shinichi Nishigaki, Shiro Bito	Resectoscope Apparatus
06/16/92	US 5,122,138	Kim H. Manwaring	Tissue Vaporizing Accessory and Method for an Endoscope
12/01/92	US 5,167,659	Naoki Ohtomo; Shizuo Ninomiya	Blood Coagulating Apparatus
12/15/92	US 5,171,311	Mark A. Rydell, David J. Parins, Steven W. Berhow	Percutaneous Laparoscopic Cholectectomy Instrument
03/30/93	US 5,197,963	David J. Parins	Electrosurgical Instrument with Extendable Sheath for Irrigation and Aspiration
04/26/94	US 5,306,238	Richard P. Fleenor	Laparoscopic Electrosurgical Pencil
06/13/95	US 5,423,882	Warren M. Jackman, Wilton W. Webster, Jr.	Catheter Having Electrode with Annular Recess and Method of Using Same
10/03/95	US 5,454,809	Michael Janssen	Electrosurgical Catheter And Method For Resolving Artherosclerotic Plaque By Radio Frequency Sparking

Smith & Nephew may also rely on the file history of U.S. Patent No. 4,116,198.

U.S. Patent No. 5,697,882: Claim 26

ISSUE/ PUBLICATION DATE	PATENT NUMBER/ PUBLICATION	INVENTOR/AUTHOR	TITLE
05/00/69	Bio-Medical Engineering 206-216	A.K. Dobbie	The Electrical Aspects of Surgical Diathermy
08/16/33	US 2,056,377	F.C. Wappler	Electronic Instrument
06/11/74	US 3,815,604	Conor C. O'Malley, Ralph M. Heintz, Sr.	Apparatus For Intraocular Surgery
08/13/74	US 3,828,780	Charles F. Morrison, Jr.	Combined Electrocoagulator-Suction Instrument
01/00/75	IEEE Transactions On Biomedical Engineering	William M. Honig	The Mechanism of Cutting in Electrosurgery
08/26/75	US 3,901,242	Karl Storz	Electric Surgical Instrument
11/18/75	US 3,920,021	Siegfried Hiltebrandt	Coagulating Devices
02/24/76	US 3,939,839	Lawrence E. Curtiss	Resectoscope and Electrode Therefor
07/20/76	US 3,970,088	Charles F. Morrison	Electrosurgical Devices Having Sesquipolar Electrode Structures Incorporated Therein
00/00/76	Acta Medicotechnica (Medizinal-Markt), Vol. 24, No. 4, 1976 129 – 134	E. Elsasser and E. Roos	Über ein Instrument zur leckstromfreien transurethralen Resection (Concerning An Instrument for transurethral resection without leakage of current)
01/07/77	2 313 949/ N 76 17587	Siegfried Hiltebrandt et Ludwig Bonnet	Boucle de sectionnement a une ou deux branches pour resertoscope
02/21/78	US 4,074,718	Charles F. Morrison, Jr.	Electrosurgical Instrument
06/06/78	US 4,092,986	Max Schneiderman	Constant Output Electrosurgical Unit
09/26/78	US 4,116,198	Eberhard Roos	Electro-Surgical Device
11/00/79	Digestive Diseases and Sciences, Vol. 24, No. 11, 845-848	M.B. Dennis, J. Peoples, R. Hulett, D.C. Auth, R.L. Protell, C.E. Rubin, and F.E. Silverstein	Evolution of Electrofulguration in Control of Bleeding of Experimental Gastric Ulcers
01/01/80	US 4,181,131	Hisao Ogiu	High Frequency

			Electrosurgical Instrument for Cutting Human Body Cavity Structures
01/22/80	US 4,184,492	Hans H. Meinke, Gerhard Flachenecker, Karl Fastenmeier, Friedrich Landstorfer, Heinz Lidenmeier	Safety Circuitry for High Frequency Cutting and Coagulating Devices
04/27/82	US 4,326,529	James D. Doss and Richard L. Hutson	Corneal-Shaping Electrode
04/26/83	US 4,381,007	James D. Doss	Multipolar Corneal-Shaping Electrode with Flexible Removable Skirt
00/00/84	Gut, 25, 1424-1431	C.P. Swain, TN Mills, E. Shemesh, Julia M. Dark, M.R. Lewin, J.S. Clifton, T.C. Northfield, P.B. Cotton, and P.R. Salmon	Which Electrode? A comparison of four endoscopic methods of electrocoagulation in experimental bleeding ulcers
00/00/85	Urological Research 13:99-102	J.W.A. Ramsay, N.A. Shepherd, M. Butler, P.T. Gosling, R.A. Miller, D.M.A. Wallace, H.N. Whitfield	A Comparison of Bipolar and Monopolar Diathermy Probes in Experimental Animals
06/00/85	JACC Vol. 5, No. 6, 1382-6	Cornelis J. Slager, MSc, Catharina E. Essed, MD, Johan C.H. Schuurbiers, BSc, Nicolaas Bom, Ph.D, Patrick W. Serruys, MD, Geert T. Meester, MD, FACC	Vaporization of Atherosclerotic Plaques by Spark Erosion
10/22/85	US 4,548,207	Harry G. Reimels	Disposable Coagulator
05/27/86	US 4,590,934	Jerry L. Malis, Leonard I. Malis, Robert R. Acorcey, David Solt	Bipolar Cutter/Coagulator
00/00/87	Kardiologie, Kardiol.76: Supp. 6, 67-71 (1987)	C.J. Slager, A.C. Phaff, C.E. Essed, J.C.H. Schuurbiers, N. Bom, V.A. Vandenbroucke, and P.W. Serruys	Spark Erosion of Arteriosclerotic Plaques
4/28/87	US 4,660,571	Stanley R. Hess, Terri Kovacs	Percutaneous Lead Having Radially Adjustable Electrode
06/23/87	US 4,674,499	David S.C. Pao	Coaxial Bipolar Probe
07/00/88	Valleylab Part	Valleylab, Inc.	Surgistat Service Manual

	Number 945 100 102 A		
00/00/89	SPIE Vol. 1068 Catheter-based Sensing and Imaging Technology	Paul C. Nardella	Radio Frequency Energy and Impedance Feedback
00/00/89	The Organizing Committee of the 7th World Congress on Endourology and ESWL Foundation for Advancement of International Science	Robert Tucker and Stefan Loening	A Bipolar Electrosurgical Turp Loop
03/00/89	Journal of Urology Vol. 141, 662-665	Robert D. Tucker, Eugene V. Kramolowsky, Eric Bedell and Charles E. Platz	A Comparison of Urologic Application of Bipolar Versus Monopolar Five French Electrosurgical Probes
02/21/89	US 4,805,616	David S.C. Pao	Bipolar Probes for Ophthalmic Surgery and Methods of Performing Anterior Capsulotomy
04/00/89	JACC Vol. 13 No. 5, 1167-75	Benjamin I. Lee, MD, FACC, Gary J. Becker, MD, Bruce F. Waller, MD, FACC, Kevin J. Barry, MS, Raymond J. Connolly, Ph.D, Jonathan Kaplan, MD, Alan R. Shapiro, MS, Paul C. Nardella, BS	Thermal Compression and Molding of Atherosclerotic Vascular Tissue With Use of Radiofrequency Eneergy: Implications for Radiofrequency Balloon Angioplasty
00/00/90	Urological Research 18:291-294	R.D. Tucker, E.V. Kramolowsky, and C.E. Platz	In vivo effect of 5 French bipolar and monopolar electrosurgical probes on the porcine bladder
02/00/90	Journal of Urology Vol. 143, 275-277	Eugene V. Kramolowsky and Robert D. Tucker	Use of 5F Bipolar Electrosurgical Probe in Endoscopic Urologiical Procedures
04/05/90	WO 90/03152	John Considine, John Colin	Electro-surgical Apparatus for Removing Tumours from Hollow Organs of the Body
06/05/90	US 4,931,047	Alan Broadwin, Charles Vassallo, Joseph N. Logan, Robert W.	Method and Apparatus For Providing Enhanced Tissue Fragmentation And/Or

		Hornlein	Hemostasis
06/26/90	US 4,936,281	Peter Stasz	Ultrasonically Enhanced RF Ablation Catheter
12/11/90	US 4,976,711	David J. Parins, Mark A. Rydell, Peter Stasz	Ablation Catheter With Selectively Deployable Electrodes
12/25/90	US 4,979,948	Lesslie A. Geddes, Marvin H. Hinds, Joe D. Bourland, William D. Voorhees	Method and Apparatus For Thermally Destroying A Layer Of An Organ
04/16/91	US 5,007,908	Mark A. Rydell	Electrosurgical Instrument Having Needle Cutting Electrode And Spot-Coag Electrode
04/23/91	US 5,009,656	Harry G. Reimels	Bipolar Electrosurgical Instrument
07/30/91	US 5,035,696	Mark A. Rydell	Electrosurgical Instrument For Conducting Endoscopic Retrograde Sphincterotomy
09/10/91	US 5,047,026	Mark A. Rydell	Electrosurgical Implement For Tunneling Through Tissue
09/10/91	US 5,047,027	Mark A. Rydell	Tumor Resector
09/00/91	Journal of Urology Vol. 146, 669	Eugene V. Kramolowsky and Robert D. Tucker	The Urological Application of Electrosurgery
10/07/91	Bipolar Laparoscopic Cholecystectomy Lecture	Dr. Olsen	Bipolar Laparoscopic Cholecystectomy
01/14/92	US 5,080,660	Terrence J. Buelna	Electrosurgical Electrode
02/18/92	US 5,088,997	Louis Delahuerga, Robert B. Stoddard, Michael S. Klicek	Gas Coagulation Device
03/24/92	US 5,098,431	Mark A. Rydell	RF Ablation Catheter
04/28/92	US 5,108,391	Gerhard Flachenecker, Karl Fastenmeier, Heinz Lindenmeier	High-Frequency Generator For Tissue Cutting And For Coagulating In High-Frequency Surgery
05/12/92	US 5,112,330	Shinichi Nishigaki, Shiro Bito	Resectoscope Apparatus
06/16/92	US 5,122,138	Kim H. Manwaring	Tissue Vaporizing Accessory and Method for an Endoscope
12/01/92	US 5,167,659	Naoki Ohtomo; Shizuo Ninomiya	Blood Coagulating Apparatus

12/15/92	US 5,171,311	Mark A. Rydell, David J. Parins, Steven W. Berhow	Percutaneous Laparoscopic Cholectectomy Instrument
03/30/93	US 5,197,963	David J. Parins	Electrosurgical Instrument with Extendable Sheath for Irrigation and Aspiration
04/26/94	US 5,306,238	Richard P. Fleenor	Laparoscopic Electrosurgical Pencil
06/13/95	US 5,423,882	Warren M. Jackman, Wilton W. Webster, Jr.	Catheter Having Electrode With Annular Recess and Method of Using Same
10/03/95	US 5,454,809	Michael Janssen	Electrosurgical Catheter And Method For Resolving Artherosclerotic Plaque By Radio Frequency Sparking

In addition, Smith & Nephew may rely on the findings of fact made by Judge William H. Orrick in his Memorandum Decision and Order dated December 1, 1998, in which he found that there was "a substantial question to whether claim 26 of the '882 patent is invalid for obviousness in light of the Roos '198 patent and the Elsasser and Roos article." Smith & Nephew may also rely on the file history of U.S. Patent No. 4,116,198.

U.S. Patent No. 5,697,882: Claim 28

ISSUE/ PUBLICATION DATE	PATENT NUMBER/ PUBLICATION	INVENTOR/AUTHOR	TITLE
08/16/33	US 2,056,377	F.C. Wappler	Electronic Instrument
08/26/75	US 3,901,242	Karl Storz	Electric Surgical Instrument
11/18/75	US 3,920,021	Siegfried Hiltebrandt	Coagulating Devices
00/00/76	Acta Medicotechnica (Medizinal-Markt), Vol. 24, No. 4, 1976 129 – 134	E. Elsasser and E. Roos	Uber ein Instrument zur leckstromfreien transurethralen Resection (Concerning An Instrument for Transurethral resection without leakage of current)
02/24/76	US 3,939,839	Lawrence E. Curtiss	Resectoscope and Electrode Therefor

07/20/76	US 3,970,088	Charles F. Morrison	Electrosurgical Devices Having Sesquipolar Electrode Structures Incorporated Therein
01/07/77	2 313 949/ N 76 17587	Siegfried Hiltebrandt et Ludwig Bonnet	Boucle de sectionnement a une ou deux branches pour resertoscope
02/21/78	US 4,074,718	Charles F. Morrison, Jr.	Electrosurgical Instrument
09/26/78	US 4,116,198	Eberhard Roos	Electro-Surgical Device
01/01/80	US 4,181,131	Hisao Ogiu	High Frequency Electrosurgical Instrument for Cutting Human Body Cavity Structures
01/22/80	US 4,184,492	Hans H. Meinke, Gerhard Flachenecker, Karl Fastenmeier, Friedrich Landstorfer, Heinz Lidenmeier	Safety Circuitry for High Frequency Cutting and Coagulating Devices
02/00/82	CRC Press, American Heart Journal, Vol. 117, 332-341	Kevin J. Barry, MS, Jonathan Kaplan, MD, Raymond J. Connolly, Ph.D, Paul Nardella, BS, Benjamin L Lee, MD, Gary J. Becker, MD, Bruce F. Waller, MD, and Allan D. Callow, MD, Ph.D	The effect of radiofrequency-generated thermal energy on the mechanical and histologic characteristics of the arterial wall in vivo: Implications for radiofrequency angioplasty
4/27/82	US 4,326,529	James D. Doss and Richard L. Hutson	Corneal-Shaping Electrode
04/26/83	US 4,381,007	James D. Doss	Multipolar Corneal-Shaping Electrode with Flexible Removable Skirt
00/00/84	Gut, 25, 1424-1431	C.P. Swain, TN Mills, E. Shemesh, Julia M. Dark, M.R. Lewin, J.S. Clifton, T.C. Northfield, P.B. Cotton, and P.R. Salmon	Which Electrode? A comparison of four endoscopic methods of electrocoagulation in experimental bleeding ulcers
10/22/85	US 4,548,207	Harry G. Reimels	Disposable Coagulator
00/00/85	Urological Research 13:99-102	J.W.A. Ramsay, N.A. Shepherd, M. Butler, P.T. Gosling, R.A. Miller, D.M.A. Wallace, H.N. Whitfield	A Comparison of Bipolar and Monopolar Diathermy Probes in Experimental Animals
06/00/85	JACC Vol. 5, No. 6,	Cornelis J. Slager, MSc,	Vaporization of

	1382-6	Catharina E. Essed, MD, Johan C.H. Schuurbiers, BSc, Nicolaas Bom, Ph.D, Patrick W. Serruys, MD, Geert T. Meester, MD, FACC	Atherosclerotic Plaques by Spark Erosion
05/27/86	US 4,590,934	Jerry L. Malis, Leonard I. Malis, Robert R. Acorcey, David Solt	Bipolar Cutter/Coagulator
00/00/87	Kardiologie, Kardiol.76: Supp. 6, 67-71 (1987)	C.J. Slager, A.C. Phaff, C.E. Essed, J.C.H. Schuurbiers, N. Bom, V.A. Vandenbroucke, and P.W. Serruys	Spark Erosion of Arteriosclerotic Plaques
04/28/87	US 4,660,571	Stanley R. Hess, Terri Kovacs	Percutaneous Lead Having Radially Adjustable Electrode
06/23/87	US 4,674,499	David S.C. Pao	Coaxial Bipolar Probe
03/00/89	Journal of Urology Vol. 141, 662-665	Robert D. Tucker, Eugene V. Kramolowsky, Eric Bedell and Charles E. Platz	A Comparison of Urologic Application of Bipolar Versus Monopolar Five French Electrosurgical Probes
00/00/89	SPIE Vol. 1068 Catheter-based ensing and Imaging Technology	Paul C. Nardella	Radio Frequency Energy and Impedance Feedback
00/00/89	The Organizing Committee of the 7th World Congress on Endourology and ESWL Foundation for Advancement of International Science	Robert Tucker and Stefan Loening	A Bipolar Electrosurgical Turp Loop
02/21/89	US 4,805,616	David S.C. Pao	Bipolar Probes for Ophthalmic Surgery and Methods of Performing Anterior Capsulotomy
04/00/89	JACC Vol. 13 No. 5, 1167-75	Benjamin I. Lee, MD, FACC, Gary J. Becker, MD, Bruce F. Waller, MD, FACC, Kevin J. Barry, MS, Raymond J. Connolly, Ph.D, Jonathan Kaplan, MD, Alan R. Shapiro, MS,	Thermal Compression and Molding of Atherosclerotic Vascular Tissue With Use of Radiofrequency Energy: Implications for Radiofrequency Balloon Angioplasty

		Paul C. Nardella, BS	
05/23/89	US 4,832,048	Donald Cohen	Suction Ablation Catheter
00/00/90	Urological Research 18:291-294	R.D. Tucker, E.V. Kramolowsky, and C.E. Platz	In vivo effect of 5 French bipolar and monopolar electrosurgical probes on the porcine bladder
02/00/90	Journal of Urology Vol. 143, 275-277	Eugene V. Kramolowsky and Robert D. Tucker	Use of 5F Bipolar Electrosurgical Probe in Endoscopic Urologiical Procedures
04/05/90	WO 90/03152	John Considine, John Colin	Electro-surgical Apparatus for Removing Tumours from Hollow Organs of the Body
05/01/90	US 4,920,978	David P. Colvin	Method and Apparatus for the Endoscopic Treatment of Deep Tumors Using RF Hyperthermia
06/26/90	US 4,936,281	Peter Stasz	Ultrasonically Enhanced RF Ablation Catheter
10/30/90	US 4,966,597	Eric R. Cosman	Thermometric Cardiac Tissue Ablation Electrode with Ultra-Sensitive Temperature Detection
12/11/90	US 4,976,711	David J. Parins, Mark A. Rydell, Peter Stasz	Ablation Catheter With Selectively Deployable Electrodes
12/25/90	US 4,979,948	Lesslie A. Geddes, Marvin H. Hinds, Joe D. Bourland, William D. Voorhees	Method and Apparatus for Thermally Destroying A Layer of An Organ
09/00/91	Journal of Urology Vol. 146, 669	Eugene V. Kramolowsky and Robert D. Tucker	The Urological Application of Electrosurgery
04/16/91	US 5,007,908	Mark A. Rydell	Electrosurgical Instrument Having Needle Cutting Electrode And Spot-Coag Electrode
04/23/91	US 5,009,656	Harry G. Reimels	Bipolar Electrosurgical Instrument
07/30/91	US 5,035,696	Mark A. Rydell	Electrosurgical Instrument for Conducting Endoscopic Retrograde Sphincterotomy
09/10/91	US 5,047,026	Mark A. Rydell	Electrosurgical Implement For Tunneling Through Tissue
09/10/91	US 5,047,027	Mark A. Rydell	Tumor Resector

10/07/91	Bipolar Laparoscopic Cholecystectomy Lecture	Dr. Olsen	Bipolar Laparoscopic Cholecystectomy
01/14/92	US 5,080,660	Terrence J. Buelna	Electrosurgical Electrode
01/28/92	US 5,084,044	Robert H. Quint	Apparatus for Endometrial Ablation and Method of Using Same
03/24/92	US 5,098,431	Mark A. Rydell	RF Ablation Catheter
05/12/92	US 5,112,330	Shinichi Nishigaki, Shiro Bito	Resectoscope Apparatus
04/28/92	US 5,108,391	Gerhard Flachenecker, Karl Fastenmeier, Heinz Lindenmeier	High-Frequency Generator For Tissue Cutting And For Coagulating In High-Frequency Surgery
06/16/92	US 5,122,138	Kim H. Manwaring	Tissue Vaporizing Accessory and Method for an Endoscope
12/01/92	US 5,167,659	Naoki Ohtomo; Shizuo Ninomiya	Blood Coagulating Apparatus
12/15/92	US 5,171,311	Mark A. Rydell, David J. Parins, Steven W. Berhow	Percutaneous Laparoscopic Cholectectomy Instrument
03/30/93	US 5,197,963	David J. Parins	Electrosurgical Instrument with Extendable Sheath for Irrigation and Aspiration
04/26/94	US 5,306,238	Richard P. Fleenor	Laparoscopic Electrosurgical Pencil
06/13/95	US 5,423,882	Warren M. Jackman, Wilton W. Webster, Jr.	Catheter Having Electrode With Annular Recess and Method of Using Same
10/03/95	US 5,454,809	Michael Janssen	Electrosurgical Catheter And Method For Resolving Artherosclerotic Plaque By Radio Frequency Sparking

In addition, Smith & Nephew may rely on the findings of fact made by Judge William H. Orrick in his Memorandum Decision and Order dated December 1, 1998, in which he found that there was "a substantial question as to whether claim 28 of the '882 patent is invalid for obviousness in light of the Roos '198 patent and the Elsasser and Roos article." Smith & Nephew may also rely on the file history of U.S. Patent No. 4,116,198.

U.S. Patent No. 5,224,592 B1: Claim 1

ISSUE/ PUBLICATION DATE	PATENT NUMBER/ PUBLICATION	INVENTOR/AUTHOR	TITLE
00/00/76	Acta Medicotechnica (Medizinal-Markt), Vol. 24, No. 4, 1976 129 – 134	E. Elsasser and E. Roos	Über ein Instrument zur leckstromfreien transurethralen Resection (Concerning An Instrument for Transurethral resection without leakage of current)
02/24/76	US 3,939,839	Lawrence E. Curtiss	Resectoscope and Electrode Therefor
07/20/76	US 3,970,088	Charles F. Morrison	Electrosurgical Devices Having Sesquipolar Electrode Structures Incorporated Therein
01/07/77	2 313 949/ N 76 17587	Siegfried Hiltebrandt et Ludwig Bonnet	Boucle de sectionnement a une ou deux branches pour resertoscope
02/21/78	US 4,074,718	Charles F. Morrison, Jr.	Electrosurgical Instrument
09/26/78	US 4,116,198	Eberhard Roos	Electro-Surgical Device
04/26/83	US 4,381,007	James D. Doss	Multipolar Corneal-Shaping Electrode with Flexible Removable Skirt
06/00/85	JACC Vol. 5, No. 6, 1382-6	Cornelis J. Slager, MSc, Catharina E. Essed, MD, Johan C.H. Schuurbiers, BSc, Nicolaas Bom, Ph.D, Patrick W. Serruys, MD, Geert T. Meester, MD, FACC	Vaporization of Atherosclerotic Plaques by Spark Erosion
04/28/87	US 4,660,571	Stanley R. Hess, Terri Kovacs	Percutaneous Lead Having Radially Adjustable Electrode
06/23/87	US 4,674,499	David S.C. Pao	Coaxial Bipolar Probe
11/22/88	US 4,785,823	Philip E. Eggers, Robert F. Shaw	Methods And Apparatus For Performing In Vivo Blood Thermodilution Procedures
00/00/89	SPIE Vol. 1068 Catheter-based	Paul C. Nardella	Radio Frequency Energy and Impedance Feedback

	Sensing and Imaging Technology		
00/00/89	The Organizing Committee of the 7th World Congress on Endourology and ESWL Foundation for Advancement of International Science	Robert Tucker and Stefan Loening	A Bipolar Electrosurgical Turp Loop
04/23/91	US 5,009,656	Harry G. Reimels	Bipolar Electrosurgical Instrument
09/10/91	US 5,047,026	Mark A. Rydell	Electrosurgical Implement For Tunneling Through Tissue
10/07/91	Bipolar Laparoscopic Cholecystectomy Lecture	Dr. Olsen	Bipolar Laparoscopic Cholecystectomy
01/14/92	US 5,080,660	Terrence J. Buelna	Electrosurgical Electrode
02/18/92	US 5,088,997	Louis Delahuerga, Robert B. Stoddard, Michael S. Klicek	Gas Coagulation Device
03/24/92	US 5,098,431	Mark A. Rydell	RF Ablation Catheter
05/12/92	US 5,112,330	Shinichi Nishigaki, Shiro Bito	Resectoscope Apparatus
04/28/92	US 5,108,391	Gerhard Flachenecker, Karl Fastenmeier, Heinz Lindenmeier	High-Frequency Generator For Tissue Cutting And For Coagulating In High-Frequency Surgery
12/01/92	US 5,167,659	Naoki Ohtomo; Shizuo Ninomiya	Blood Coagulating Apparatus
05/04/93	US 5,207,675	Jerome Canady	Surgical Coagulation Device
04/26/94	US 5,306,238	Richard P. Fleenor	Laparoscopic Electrosurgical Pencil
06/13/95	US 5,423,882	Warren M. Jackman, Wilton W. Webster, Jr.	Catheter Having Electrode With Annular Recess and Method of Using Same
10/03/95	US 5,454,809	Michael Janssen	Electrosurgical Catheter And Method For Resolving Artherosclerotic Plaque By Radio Frequency Sparking

Smith & Nephew may also rely on the file history of U.S. Patent No. 4,116,198.

U.S. Patent No. 5,224,592 B1: Claim 23

ISSUE/ PUBLICATION DATE	PATENT NUMBER/ PUBLICATION	INVENTOR/AUTHOR	TITLE
00/00/76	Acta Medicotechnica (Medizinal-Markt), Vol. 24, No. 4, 1976 129 – 134	E. Elsasser and E. Roos	Uber ein Instrument zur leckstromfreien transurethralen Resection (Concerning An Instrument for Transurethral resection without leakage of current)
02/24/76	US 3,939,839	Lawrence E. Curtiss	Resectoscope and Electrode Therefor
07/20/76	US 3,970,088	Charles F. Morrison	Electrosurgical Devices Having Sesquipolar Electrode Structures Incorporated Therein
01/07/77	2 313 949/ N 76 17587	Siegfried Hiltebrandt et Ludwig Bonnet	Boucle de sectionnement a une ou deux branches pour resertoscope
02/21/78	US 4,074,718	Charles F. Morrison, Jr.	Electrosurgical Instrument
09/26/78	US 4,116,198	Eberhard Roos	Electro-Surgical Device
06/00/85	JACC Vol. 5, No. 6, 1382-6	Cornelis J. Slager, MSc, Catharina E. Essed, MD, Johan C.H. Schuurbiers, BSc, Nicolaas Bom, Ph.D, Patrick W. Serruys, MD, Geert T. Meester, MD, FACC	Vaporization of Atherosclerotic Plaques by Spark Erosion
04/28/87	US 4,660,571	Stanley R. Hess, Terri Kovacs	Percutaneous Lead Having Radially Adjustable Electrode
00/00/89	SPIE Vol. 1068 Catheter-based Sensing and Imaging Technology	Paul C. Nardella	Radio Frequency Energy and Impedance Feedback
00/00/89	The Organizing Committee of the 7th World Congress on Endourology and ESWL Foundation for Advancement of International Science	Robert Tucker and Stefan Loening	A Bipolar Electrosurgical Turp Loop

09/10/91	US 5,047,026	Mark A. Rydell	Electrosurgical Implement For Tunneling Through Tissue
10/07/91	Bipolar Laparoscopic Cholecystectomy Lecture	Dr. Olsen	Bipolar Laparoscopic Cholecystectomy
01/14/92	US 5,080,660	Terrence J. Buelna	Electrosurgical Electrode
02/18/92	US 5,088,997	Louis Delahuerga, Robert B. Stoddard, Michael S. Klicek	Gas Coagulation Device
03/24/92	US 5,098,431	Mark A. Rydell	RF Ablation Catheter
05/12/92	US 5,112,330	Shinichi Nishigaki, Shiro Bito	Resectoscope Apparatus
04/28/92	US 5,108,391	Gerhard Flachenecker, Karl Fastenmeier, Heinz Lindenmeier	High-Frequency Generator For Tissue Cutting And For Coagulating In High-Frequency Surgery
12/01/92	US 5,167,659	Naoki Ohtomo; Shizuo Ninomiya	Blood Coagulating Apparatus
05/04/93	US 5,207,675	Jerome Canady	Surgical Coagulation Device
04/26/94	US 5,306,238	Richard P. Fleenor	Laparoscopic Electrosurgical Pencil
06/13/95	US 5,423,882	Warren M. Jackman, Wilton W. Webster, Jr.	Catheter Having Electrode With Annular Recess and Method of Using Same
10/03/95	US 5,454,809	Michael Janssen	Electrosurgical Catheter And Method For Resolving Artherosclerotic Plaque By Radio Frequency Sparking

Smith & Nephew may also rely on the file history of U.S. Patent No. 4,116,198.

Smith & Nephew further contends that claims 1 and 28 of U.S. Patent No. 5,697,882 are invalid under 35 U.S.C. § 112 because the specification of U.S. patent No. 5,697,882 does not describe the manner and process of making and using the alleged invention, in such full, clear, concise and exact terms as to enable any person skilled in the art to which it pertains, or with which it is most nearly connected, to make and use the same. Rather, undue experimentation would be necessary to successfully practice the claimed apparatus. In addition, Smith & Nephew

may rely on the findings of fact made by Judge William H. Orrick in his Memorandum Decision and Order dated December 1, 1998, in which he concluded that there was a substantial question that claim 1 of the '882 patent is invalid for lack of enablement.

Smith & Nephew also contends that claim 28 of U.S. Patent No. 5,697,882 and claim 1 of U.S. Patent No. 5,224,592 B1 are indefinite, and therefore invalid under 35 U.S.C. § 112. Smith & Nephew's investigation into its defenses is continuing, and it may assert additional invalidity defenses as discovery progresses.

Dated: December 19, 2001

FISH & RICHARDSON P.C.

William J. Marsden, Jr. (#2247)
919 N. Market Street, Suite 1100
P.O. Box 1114
Wilmington, DE 19899-1114
Telephone: (302) 652-5070
Facsimile: (302) 652-0607

Mark J. Hebert
225 Franklin Street
Boston, MA 02110-2804
Telephone: (617) 542-5070
Facsimile: (617) 542-8906

Kurtis MacFerrin
2200 Sand Hill Road, Suite 100
Menlo Park, CA 94025
Telephone: (650) 322-5070
Facsimile: (650) 854-0875

Attorneys for Defendant
SMITH & NEPHEW, INC.

CERTIFICATE OF SERVICE

I hereby certify that on this _____ day of December, 2001, a true and correct copy of the within document was caused to be served on the attorneys of record at the following addresses as indicated:

BY HAND DELIVERY

Jack B. Blumenfeld (#1014)
MORRIS, NICHOLS, ARSHT & TUNNELL
1201 N. Market Street
P.O. Box 1347
Wilmington, DE 19899
Telephone: 302-658-9200
Facsimile: 302-658-3989

BY FEDERAL EXPRESS

Matthew D. Powers
Jared Bobrow
Perry Clark
WEIL, GOTSHAL & MANGES
201 Redwood Shores Parkway
Redwood Shores, CA 94065
Telephone: 650-802-3000
Facsimile: 605-802-3100

William J. Marsden, Jr.

80003494.doc

Fish & Richardson P.C.

500 Arguello Street
Suite 500
Redwood City, California
94063-1526

Telephone
650 839-5070

Facsimile
650 839-5071

Web Site
www.fr.com

Frederick P. Fish
1855-1930

W.K. Richardson
1859-1951

BOSTON
DALLAS
DELAWARE
NEW YORK
SAN DIEGO
SILICON VALLEY
TWIN CITIES
WASHINGTON, DC

BY FAX AND MAIL

March 29, 2002

Perry Clark, Esq.
Weil, Gotshal & Manges LLP
201 Redwood Shores Parkway
Redwood Shores, CA 94065

Re: Arthrocare Suit - Delaware
USDC-D. Del. - C.A. No. 01-504-SLR

Dear Perry:

Pursuant to the discussion during the discovery conference, I have enclosed Smith & Nephew's supplemental noninfringement and invalidity responses, which are subject to and made without waiving Smith & Nephew's previous objections to ArthroCare's discovery requests. We reserve the right to revise these responses as discovery proceeds. In particular, we reserve the right to revise these responses after we have received meaningful discovery on ArthroCare's claim construction and infringement contentions, and after the Court has construed the asserted claims.

Smith & Nephew objects to ArthroCare's improper attempts to informally amend its infringement allegations. Our responses concern (1) the Dyonics Control RF System which is the only product alleged in ArthroCare's Complaint to infringe and (2) the asserted claims originally identified in Jared Bobrow's November 2, 2001 letter. We are not providing responses at this time for the additional claims listed in your March 15 letter since that was the first notice we received, just two weeks ago, that those claims were being asserted. We are in the process of preparing responses to those additional claims, however, and expect to have them to you within the next two weeks.

In addition, and in response to your letter of March 27, 2002, we are also not providing responses at this time for the Dyonics Electroblade Resector ("Electroblade") since it is not in the case. As you know, Electroblade was not accused in ArthroCare's Complaint. The only product ArthroCare accused in its Complaint was the Dyonics Control RF System. Further, ArthroCare failed to move to amend its Complaint as it is required to do under the Rules, and the deadline for amending pleadings in this case expired on March 8, 2002. Instead, ArthroCare merely stated in a letter a week later that "Electroblade is now among the accused products."

As you know, the accusation of infringement in a patent lawsuit is a formal step in the case that carries with it certain burdens to investigate under Rule 11. *Judin v. United*

States, 110 F.3d 780 (Fed. Cir. 1997); *Antonious v. Spalding & Evenflo Companies*, Inc., 275 F.3d 1066 (Fed. Cir. 2002). Indeed, in light of ArthroCare's argument during the discovery conference on March 5 that it needed discovery to determine whether Electroblade infringes, we were quite surprised that Electroblade was included in ArthroCare's infringement chart. Accordingly, we question whether ArthroCare can meet its burden under Rule 11 with respect to Electroblade.

Please let me know if you are in disagreement with any of the foregoing.

Very truly yours,

Keith Walter /KDM

Keith Walter

REDACTED

2. <u>U.S. Patent No. 5,697,882 ("the '882 patent")</u>

REDACTED

REDACTED

Smith & Nephew's Supplemental Response Re Invalidity

In addition to its previous objections, and without waiving any of those objections, Smith & Nephew also objects to providing its invalidity contentions at this time, since ArthroCare has refused to provide any of its contentions with respect to construction of the claims of its patents. Accordingly, Smith & Nephew reserves the right to supplement, amend, or otherwise modify its invalidity contentions as the case proceeds, and particularly after ArthroCare provides its proposed claim construction and/or after the Court construes the claims of ArthroCare's patents.

Nevertheless, as of the present time, Smith & Nephew incorporates its previous responses by reference, and further responds as follows:

Certain of Smith & Nephew's invalidity contentions are based on invalidity under 35 U.S.C. § 102 and/or § 103 in view of certain prior art references. In the interest of brevity and convenience, rather than repeat the full names of those references in connection with each such contention, Smith & Nephew will instead refer to those references by number, in accordance with the following table:

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
1	08/16/33	US 2,056,377	F.C. Wappler	Electronic Instrument
2	05/00/69	Bio-Medical Engineering 206-216	A.K. Dobbie	The Electrical Aspects of Surgical Diathermy
3	06/11/74	US 3,815,604	Conor C. O'Malley, Ralph M. Heintz, Sr.	Apparatus For Intraocular Surgery
4	08/13/74	US 3,828,780	Charles F. Morrison, Jr.	Combined Electrocoagulator-Suction Instrument
5	01/00/75	IEEE Transactions On Biomedical Engineering	William M. Honig	The Mechanism of Cutting in Electrosurgery

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
6	08/26/75	US 3,901,242	Karl Storz	Electric Surgical Instrument
7	11/18/75	US 3,920,021	Siegfried Hiltebrandt	Coagulating Devices
8	00/00/76	Acta Medicotechnica (Medizinal-Markt), Vol. 24, No. 4, 1976 129 – 134	E. Elsasser and E. Roos	Über ein Instrument zur leckstromfreien transurethralen Resection (Concerning An Instrument for Transurethral resection without leakage of current)
9	02/24/76	US 3,939,839	Lawrence E. Curtiss	Resectoscope and Electrode Therefor
10	07/20/76	US 3,970,088	Charles F. Morrison	Electrosurgical Devices Having Sesquipolar Electrode Structures Incorporated Therein
11	01/07/77	2 313 949/ N 76 17587	Siegfried Hiltebrandt et Ludwig Bonnet	Boucle de sectionnement a une ou deux branches pour resertoscope
12	00/00/78	Gastroenterology, Vol. 74, No. 3, 527-534, 1978	J.R.A. Piercey, M.D., D.C. Auth, Ph.D, P.E., F.E. Silverstein, M.D., H.R. Willard, Ph.D, M.B. Dennis, D.V.M., D.M. Ellefson, B.S., D.M. Davis, M.S.E.E., R.L. Protell, M.D. and C.E. Rubin, M.D.	Electrosurgical Treatment of Experimental Bleeding Canine Gastric Ulcers: Development and testing of a computer control and a better electrode
13	02/21/78	US 4,074,718	Charles F. Morrison, Jr.	Electrosurgical Instrument
14	06/06/78	US 4,092,986	Max Schneiderman	Constant Output Electrosurgical Unit
15	09/26/78	US 4,116,198 and its file history	Eberhard Roos	Electro-Surgical Device
16	11/00/79	Digestive Diseases and Sciences, Vol. 24, No. 11, 845-848	M.B. Dennis, J. Peoples, R. Hulett, D.C. Auth, R.L. Protell, C.E. Rubin, and F.E. Silverstein	Evolution of Electrofulguration in Control of Bleeding of Experimental Gastric Ulcers

#	Issue/ Pub'n Date	Patent Number/ Publicati n	Inventor/Author	Title
17	01/01/80	US 4,181,131	Hisao Ogiu	High Frequency Electrosurgical Instrument for Cutting Human Body Cavity Structures
18	01/22/80	US 4,184,492	Hans H. Meinke, Gerhard Flachenecker, Karl Fastenmeier, Friedrich Landstorfer, Heinz Lidenmeier	Safety Circuitry for High Frequency Cutting and Coagulating Devices
19	11/11/80	US 4,232,676	Andrew Herczog	Surgical Cutting Instrument
20	02/03/81	US 4,248,231	Andrew Herczog and James A. Murphy	Surgical Cutting Instrument
21	02/00/82	CRC Press, American Heart Journal, Vol. 117, 332-341	Kevin J. Barry, MS, Jonathan Kaplan, MD, Raymond J. Connolly, Ph.D, Paul Nardella, BS, Benjamin I. Lee, MD, Gary J. Becker, MD, Bruce F. Waller, MD, and Allan D. Callow, MD, Ph.D	The effect of radiofrequency-generated thermal energy on the mechanical and histologic characteristics of the arterial wall in vivo: Implications for radiofrequency angioplasty
22	04/27/82	US 4,326,529	James D. Doss and Richard L. Hutson	Corneal-Shaping Electrode
23	04/26/83	US 4,381,007	James D. Doss	Multipolar Corneal-Shaping Electrode with Flexible Removable Skirt
24	00/00/84	Gut, 25, 1424-1431	C.P. Swain, TN Mills, E. Shemesh, Julia M. Dark, M.R. Lewin, J.S. Clifton, T.C. Northfield, P.B. Cotton, and P.R. Salmon	Which Electrode? A comparison of four endoscopic methods of electrocoagulation in experimental bleeding ulcers

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
25	00/00/85	Urological Research 13:99-102	J.W.A. Ramsay, N.A. Shepherd, M. Butler, P.T. Gosling, R.A. Miller, D.M.A. Wallace, H.N. Whitfield	A Comparison of Bipolar and Monopolar Diathermy Probes in Experimental Animals
26	06/00/85	JACC Vol. 5, No. 6, 1382-6	Cornelis J. Slager, MSc, Catharina E. Essed, MD, Johan C.H. Schuurbiers, BSc, Nicolaas Bom, Ph.D, Patrick W. Serruys, MD, Geert T. Meester, MD, FACC	Vaporization of Atherosclerotic Plaques by Spark Erosion
27	10/22/85	US 4,548,207	Harry G. Reimels	Disposable Coagulator
28	05/27/86	US 4,590,934	Jerry L. Malis, Leonard I. Malis, Robert R. Acorcey, David Solt	Bipolar Cutter/Coagulator
29	00/00/87	~~Kardiologie,~~ Kardiol.76: Supp. 6, 67-71 (1987)	C.J. Slager, A.C. Phaff, C.E. Essed, J.C.H. Schuurbiers, N. Bom, V.A. Vandenbroucke, and P.W. Serruys	Spark Erosion of Arteriosclerotic Plaques
30	04/28/87	US 4,660,571	Stanley R. Hess, Terri Kovacs	Percutaneous Lead Having Radially Adjustable Electrode
31	06/23/87	US 4,674,499	David S.C. Pao	Coaxial Bipolar Probe
32	07/00/88	Valleylab Part Number 945 100 102 A	Valleylab, Inc.	Surgistat Service Manual
33	11/22/88	US 4,785,823	Philip E. Eggers, Robert F. Shaw	Methods And Apparatus For Performing In Vivo Blood Thermodilution Procedures
34	00/00/89	SPIE Vol. 1068 Catheter-based Sensing and Imaging Technology	Paul C. Nardella	Radio Frequency Energy and Impedance Feedback

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
35	00/00/89	The Organizing Committee of the 7th World Congress on Endourology and ESWL Foundation for Advancement of International Science	Robert Tucker and Stefan Loening	A Bipolar Electrosurgical Turp Loop
36	02/21/89	US 4,805,616	David S.C. Pao	Bipolar Probes for Ophthalmic Surgery and Methods of Performing Anterior Capsulotomy
37	03/00/89	Journal of Urology Vol. 141, 662-665	Robert D. Tucker, Eugene V. Kramolowsky, Eric Bedell and Charles E. Platz	A Comparison of Urologic Application of Bipolar Versus Monopolar Five French Electrosurgical Probes
38	04/00/89	JACC Vol. 13 No. 5, 1167-75	Benjamin I. Lee, MD, FACC, Gary J. Becker, MD, Bruce F. Waller, MD, FACC, Kevin J. Barry, MS, Raymond J. Connolly, Ph.D, Jonathan Kaplan, MD, Alan R. Shapiro, MS, Paul C. Nardella, BS	Thermal Compression and Molding of Atherosclerotic Vascular Tissue With Use of Radiofrequency Energy: Implications for Radiofrequency Balloon Angioplasty
39	04/25/89	US 4,823,791	Frank D. D'Amelio, Dawn M. DeLemos, Dominick G. Esposito, Michelle D. Maxfield, Claude E. Petruzzi, Robert H. Quint	Electrosurgical Probe Apparatus
40	05/23/89	US 4,832,048	Donald Cohen	Suction Ablation Catheter
41	00/00/90	Urological Research 18:291-294	R.D. Tucker, E.V. Kramolowsky, and C.E. Platz	In vivo effect of 5 French bipolar and monopolar electrosurgical probes on the porcine bladder

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
42	02/00/90	Journal of Urology Vol. 143, 275-277	Eugene V. Kramolowsky and Robert D. Tucker	Use of 5F Bipolar Electrosurgical Probe in Endoscopic Urologiical Procedures
43	04/05/90	WO 90/03152	John Considine, John Colin	Electro-surgical Apparatus for Removing Tumours from Hollow Organs of the Body
44	05/01/90	US 4,920,978	David P. Colvin	Method and Apparatus for the Endoscopic Treatment of Deep Tumors Using RF Hyperthermia
45	06/05/90	US 4,931,047	Alan Broadwin, Charles Vassallo, Joseph N. Logan, Robert W. Hornlein	Method and Apparatus For Providing Enhanced Tissue Fragmentation And/Or Hemostasis
46	06/26/90	US 4,936,281	Peter Stasz	Ultrasonically Enhanced RF Ablation Catheter
47	10/30/90	US 4,966,597	Eric R. Cosman	Thermometric Cardiac Tissue Ablation Electrode with Ultra-Sensitive Temperature Detection
48	12/11/90	US 4,976,711	David J. Parins, Mark A. Rydell, Peter Stasz	Ablation Catheter With Selectively Deployable Electrodes
49	12/25/90	US 4,979,948	Lesslie A. Geddes, Marvin H. Hinds, Joe D. Bourland, William D. Voorhees	Method and Apparatus for Thermally Destroying A Layer of An Organ
50	03/21/91	DE 3930451 A1	Ellen Hoffmann, Gerhard, Steinbeck, Rudi Mattmuller	Vorrichtung fur die Hochfrequenzkoagulation von biologischem Gewebe
51	04/16/91	US 5,007,908	Mark A. Rydell	Electrosurgical Instrument Having Needle Cutting Electrode And Spot-Coag Electrode
52	04/23/91	US 5,009,656	Harry G. Reimels	Bipolar Electrosurgical Instrument
53	07/30/91	US 5,035,696	Mark A. Rydell	Electrosurgical Instrument for Conducting Endoscopic Retrograde Sphincterotomy

#	Issue/ Pub'n Date	Patent Number/ Publication	Invent r/Author	Title
54	09/00/91	Journal of Urology Vol. 146, 669	Eugene V. Kramolowsky and Robert D. Tucker	The Urological Application of Electrosurgery
55	09/10/91	US 5,047,026	Mark A. Rydell	Electrosurgical Implement For Tunneling Through Tissue
56	09/10/91	US 5,047,027	Mark A. Rydell	Tumor Resector
57	10/07/91	Bipolar Laparoscopic Cholecystectomy Lecture	Dr. Olsen	Bipolar Laparoscopic Cholecystectomy
58	01/14/92	US 5,080,660	Terrence J. Buelna	Electrosurgical Electrode
59	01/28/92	US 5,084,044	Robert H. Quint	Apparatus for Endometrial Ablation and Method of Using Same
60	02/04/92	US 5,085,659	Mark A. Rydell	Biopsy Device With Bipolar Coagulation Capability
61	02/18/92	US 5,088,997	Louis Delahuerga, Robert B. Stoddard, Michael S. Klicek	Gas Coagulation Device
62	03/24/92	US 5,098,431	Mark A. Rydell	RF Ablation Catheter
63	04/28/92	US 5,108,391	Gerhard Flachenecker, Karl Fastenmeier, Heinz Lindenmeier	High-Frequency Generator For Tissue Cutting And For Coagulating In High-Frequency Surgery
64	05/12/92	US 5,112,330	Shinichi Nishigaki, Shiro Bito	Resectoscope Apparatus
65	06/16/92	US 5,122,138	Kim H. Manwaring	Tissue Vaporizing Accessory and Method for an Endoscope
66	12/01/92	US 5,167,659	Naoki Ohtomo; Shizuo Ninomiya	Blood Coagulating Apparatus
67	12/15/92	US 5,171,311	Mark A. Rydell, David J. Parins, Steven W. Berhow	Percutaneous Laparoscopic Cholectectomy Instrument
68	03/30/93	US 5,197,963	David J. Parins	Electrosurgical Instrument with Extendable Sheath for Irrigation and Aspiration
69	05/04/93	US 5,207,675	Jerome Canady	Surgical Coagulation Device

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
70	06/08/93	US 5,217,459	William Kamerling	Method and Instrument for Performing Eye Surgery
71	04/26/94	US 5,306,238	Richard P. Fleenor	Laparoscopic Electrosurgical Pencil
72	06/13/95	US 5,423,882	Warren M. Jackman, Wilton W. Webster, Jr.	Catheter Having Electrode With Annular Recess and Method of Using Same
73	10/03/95	US 5,454,809	Michael Janssen	Electrosurgical Catheter And Method For Resolving Artherosclerotic Plaque By Radio Frequency Sparking

1. U.S. Patent No. 5,697,536 ("the '536 patent")

A. Claim 45

Smith & Nephew contends that claim 45 of the '536 patent is anticipated by at least each of the following references: 3, 8, 12, 15, 16, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 31, 33, 35, 36, 37, 38, 41, 42, 43, 45, 46, 48, 49, 51, 52, 53, 54, 57, 61, 63, 65, 66, 67, 69, 70, 71.

Smith & Nephew also contends that claim 45 of the '536 patent would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least each of the following combinations of references, which Smith & Nephew contends would have been combined for at least the following reasons:

Combination	Motivation to Combine
Any one or more of 1, 4, 5, 6, 7, 9, 10, 11, 13, 16, 17, 20, 30, 33, 39, 40, 44, 50, 55, 56, 58, 60, 61, 62, 64, 68, 69, 71, 72, 73 with any one or more of 35, 54, 57.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 1, 4, 5, 6, 7, 9, 10, 11, 13, 16, 17, 20, 30, 33, 39, 40, 44, 50, 55, 56, 58, 60, 61, 62, 64, 68, 69, 71, 72, 73 with any other one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

Combination	Motivation t C mbine
Any one or more of 35, 54, 57 with 59.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 35, 54, 57 with any other one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 34, 47 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
59 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

2. **U.S. Patent No. 5,697,882 ("the 882 patent")**

A. **Claim 1**

Smith & Nephew contends that claim 1 of the '882 patent is anticipated by at least each of the following references: 2, 3, 5, 8, 15, 16, 18, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 34, 35, 36, 37, 38, 42, 45, 46, 48, 49, 51, 52, 53, 54, 55, 57, 61, 62, 63, 65, 66, 67, 68, 71, 73.

Smith & Nephew also contends that claim 1 of the '882 patent would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least each of the following combinations of references, which Smith & Nephew contends would have been combined for at least the following reasons:

Combination	Motivation to Combine
Any one or more of 1, 6, 7, 9, 11, 17, 30, 39, 40, 44, 47, 50, 55, 56, 58, 61, 62, 64, 68, 69, 71, 73 with any other one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

C mbination	Motivation to Combine
Any one or more of 1, 6, 7, 9, 11, 17, 30, 39, 40, 44, 47, 50, 55, 56, 58, 61, 62, 64, 68, 69, 71, 73 with any one or more of 2, 3, 4, 12, 16, 18, 21, 22, 23, 24, 25, 27, 28, 31, 33, 34, 35, 36, 37, 41, 42, 43, 45, 46, 48, 49, 51, 53, 54, 57, 60, 63, 66, 67, 70, 72 and with any one or more of 10, 13.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 3, 4, 12, 16, 18, 21, 22, 23, 24, 25, 27, 28, 31, 33, 34, 35, 36, 37, 41, 42, 43, 45, 46, 48, 49, 51, 53, 54, 57, 60, 63, 66, 67, 70, 72 with any other one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 3, 4, 12, 16, 18, 21, 22, 23, 24, 25, 27, 28, 31, 33, 34, 35, 36, 37, 41, 42, 43, 45, 46, 48, 49, 51, 53, 54, 57, 60, 63, 66, 67, 70, 72 with any one or more of 10, 13.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 10, 13 with any other one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

Smith & Nephew further contends that claim 1 of the '882 patent is also invalid as indefinite under 35 U.S.C. § 112 ¶ 2.

B. Claim 26

Smith & Nephew contends that claim 26 of the '882 patent is anticipated by at least each of the following references: 2, 5, 23, 26, 29, 61, 63.

Smith & Nephew also contends that claim 26 of the '882 patent would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least each of the following combinations of references, which Smith & Nephew contends would have been combined for at least the following reasons:

Combination	M tivation to C mbine
Any one or more of 1, 6, 7, 10, 11, 13, 17, 30, 39, 40, 44, 47, 50, 55, 56, 58, 62, 64, 68, 69, 71, 73 with any one or more of 3, 4, 8, 12, 15, 16, 18, 21, 22, 23, 24, 25, 27, 28, 31, 33, 34, 35, 36, 37, 38, 41, 42, 43, 45, 46, 48, 49, 51, 52, 53, 54, 57, 60, 65, 66, 67, 70, 72 and with any one or more of 9, 14, 32, 61.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 1, 6, 7, 10, 11, 13, 17, 30, 39, 40, 44, 47, 50, 55, 56, 58, 62, 64, 68, 69, 71, 73 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 3, 4, 8, 12, 15, 16, 18, 21, 22, 24, 25, 27, 28, 31, 33, 34, 35, 36, 37, 38, 41, 42, 43, 45, 46, 48, 49, 51, 52, 53, 54, 57, 60, 65, 66, 67, 70, 72 with any one or more of 9, 14, 32, 61.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 3, 4, 8, 12, 15, 16, 18, 21, 22, 24, 25, 27, 28, 31, 33, 34, 35, 36, 37, 38, 41, 42, 43, 45, 46, 48, 49, 51, 52, 53, 54, 57, 60, 65, 66, 67, 70, 72 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 9, 14, 32, 61 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

Smith & Nephew further contends that claim 26 of the '882 patent is also invalid as indefinite under 35 U.S.C. § 112 ¶ 2.

C. **Claim 28**

Smith & Nephew contends that claim 28 of the '882 patent is anticipated by at least each of the following references: 8, 15, 21, 26, 29, 41, 42, 45, 57.

Smith & Nephew also contends that claim 28 of the '882 patent would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least each of the following combinations of references, which Smith & Nephew contends would have been combined for at least the following reasons:

Combination	Motivation t Combine
Any one or more of 1, 6, 7, 9, 10, 11, 13, 17, 30, 39, 40, 47, 50, 55, 56, 58, 62, 64, 68, 69, 71, 73 with any one or more of 2, 3, 4, 5, 12, 16, 18, 19, 20, 22, 23, 24, 25, 27, 28, 31, 33, 34, 35, 36, 37, 38, 43, 46, 48, 49, 51, 52, 53, 54, 60, 63, 65, 66, 67, 70, 72 and with any one or more of 44, 61.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 1, 6, 7, 9, 10, 11, 13, 17, 30, 39, 40, 47, 50, 55, 56, 58, 62, 64, 68, 69, 71, 73 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 3, 4, 5, 12, 16, 18, 19, 20, 22, 23, 24, 25, 27, 28, 31, 33, 34, 35, 36, 37, 38, 43, 46, 48, 49, 51, 52, 53, 54, 60, 63, 65, 66, 67, 70, 72 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 3, 4, 5, 12, 16, 18, 19, 20, 22, 23, 24, 25, 27, 28, 31, 33, 34, 35, 36, 37, 38, 43, 46, 48, 49, 51, 52, 53, 54, 60, 63, 65, 66, 67, 70, 72 with any one or more of 44, 61.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 44, 61 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

Smith & Nephew further contends that claim 28 of the '882 patent is also invalid as indefinite under 35 U.S.C. § 112 ¶ 2.

3. **U.S. Patent No. 6,224,592 ("the '592 patent")**

A. **Claim 1**

Smith & Nephew contends that claim 1 of the '592 patent is anticipated by at least each of the following references: 8, 15, 23, 26, 30, 31, 33, 34, 46, 48, 51, 52, 62, 72.

Smith & Nephew also contends that claim 1 of the '592 patent would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least

each of the following combinations of references, which Smith & Nephew contends would have been combined for at least the following reasons:

Combination	Motivation to Combine
Any one or more of 1, 6, 7, 9, 10, 11, 13, 17, 30, 39, 40, 44, 47, 50, 55, 56, 58, 62, 64, 68, 69, 71, 73 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 1, 6, 7, 9, 10, 11, 13, 17, 30, 39, 40, 44, 47, 50, 55, 56, 58, 62, 64, 68, 69, 71, 73 with any one or more of 2, 3, 4, 5, 12, 16, 18, 20, 21, 22, 24, 25, 27, 28, 29, 31, 33, 34, 35, 36, 37, 38, 41, 42, 43, 45, 49, 53, 54, 57, 60, 61, 63, 65, 66, 67, 70, 72 and with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 3, 4, 5, 12, 16, 18, 20, 21, 22, 24, 25, 27, 28, 29, 31, 33, 34, 35, 36, 37, 38, 41, 42, 43, 45, 49, 53, 54, 57, 60, 61, 63, 65, 66, 67, 70, 72 with any one ore more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

Smith & Nephew further contends that claim 1 of the '592 patent is also invalid as indefinite under 35 U.S.C. § 112 ¶ 2.

B. **Claim 23**

Smith & Nephew contends that claim 23 of the '592 patent is anticipated by at least each of the following references: 8, 15, 26, 30, 34, 46, 48, 51, 62, 72.

Smith & Nephew also contends that claim 23 of the '592 patent would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least each of the following combinations of references, which Smith & Nephew contends would have been combined for at least the following reasons:

Combination	Motivation t C mbine
Any one or more of 4, 5, 12, 16, 24, 25, 31, 36, 37, 38, 41, 42, 53, 61, 63, 65, 66, 67, 70, 72 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 3, 18, 19, 20, 21, 22, 23, 27, 28, 29, 33, 34, 35, 43, 45, 49, 52, 54, 57, 60 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 3, 18, 19, 20, 21, 22, 23, 27, 28, 29, 33, 34, 35, 43, 45, 49, 52, 54, 57, 60 with any one or more of 1, 7, 10, 17, 44, 55, 56 and any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 3, 18, 19, 20, 21, 22, 23, 27, 28, 29, 33, 34, 35, 43, 45, 49, 52, 54, 57, 60 with 59 and any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 1, 7, 10, 17, 44, 55, 56 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 6, 9, 11, 13, 30, 39, 40, 47, 50, 58, 62, 64, 68, 69, 71, 73 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 6, 9, 11, 13, 30, 39, 40, 47, 50, 58, 62, 64, 68, 69, 71, 73 with 59 and any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
59 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

4. <u>All Patents</u>

Smith & Nephew also contends that the asserted claims of the '536, '882 and '592 patents are also invalid under 35 U.S.C. § 102(f) and/or § 116 because of improper inventorship.

Smith & Nephew's investigation into its defenses is continuing, and it reserves the right to assert additional invalidity defenses as discovery progresses.

CONFIRMATION

Fish & Richardson P.C.

500 Arguello Street
Suite 500
Redwood City, California
94063-1526

Telephone
650 839-5070

Facsimile
650 839-5071

Web Site
www.fr.com

RECEIVED
JUN 06 2002
WEIL, GOTSHAL & MANGES LLP

BY FAX AND MAIL

June 3, 2002

Perry Clark, Esquire
Weil, Gotshal & Manges LLP
201 Redwood Shores Parkway
Redwood Shores, CA 94065

Re: Arthrocare Suit - Delaware
USDC-D. Del. - C.A. No. 01-504-SLR

Dear Perry:

I have enclosed Smith & Nephew's supplemental invalidity responses for the independent claims asserted against the Electroblade and Saphyre products. These responses are subject to and made without waiving Smith & Nephew's previous objections to ArthroCare's discovery requests. We reserve the right to revise these responses as discovery proceeds. In particular, we reserve the right to revise these responses after we have received meaningful discovery on ArthroCare's claim construction and infringement contentions, and after the Court has construed the asserted claims.

Very truly yours,

Kurtis MacFerrin

50092503.doc

Smith & Nephew's Second Supplemental Response Re Invalidity

In addition to its previous objections, and without waiving any of those objections, Smith & Nephew also objects to providing its invalidity contentions at this time, since ArthroCare has refused to provide any of its contentions with respect to construction of the claims of its patents. Accordingly, Smith & Nephew reserves the right to supplement, amend, or otherwise modify its invalidity contentions as the case proceeds, and particularly after ArthroCare provides its proposed claim construction and/or after the Court construes the claims of ArthroCare's patents.

Nevertheless, as of the present time, Smith & Nephew incorporates its previous responses by reference, and further responds as follows:

Certain of Smith & Nephew's invalidity contentions are based on invalidity under 35 U.S.C. § 102 and/or § 103 in view of certain prior art references. In the interest of brevity and convenience, rather than repeat the full names of those references in connection with each such contention, Smith & Nephew will instead refer to those references by number, in accordance with the following table:

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
1	08/16/33	US 2,056,377	F.C. Wappler	Electronic Instrument
2	05/00/69	Bio-Medical Engineering 206-216	A.K. Dobbie	The Electrical Aspects of Surgical Diathermy
3	06/11/74	US 3,815,604	Conor C. O'Malley, Ralph M. Heintz, Sr.	Apparatus For Intraocular Surgery
4	08/13/74	US 3,828,780	Charles F. Morrison, Jr.	Combined Electrocoagulator-Suction Instrument
5	01/00/75	IEEE Transactions On Biomedical Engineering	William M. Honig	The Mechanism of Cutting in Electrosurgery

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
6	08/26/75	US 3,901,242	Karl Storz	Electric Surgical Instrument
7	11/18/75	US 3,920,021	Siegfried Hiltebrandt	Coagulating Devices
8	00/00/76	Acta Medicotechnica (Medizinal-Markt), Vol. 24, No. 4, 1976 129 – 134	E. Elsasser and E. Roos	Uber ein Instrument zur leckstromfreien transurethralen Resection (Concerning An Instrument for Transurethral resection without leakage of current)
9	02/24/76	US 3,939,839	Lawrence E. Curtiss	Resectoscope and Electrode Therefor
10	07/20/76	US 3,970,088	Charles F. Morrison	Electrosurgical Devices Having Sesquipolar Electrode Structures Incorporated Therein
11	01/07/77	2 313 949/ N 76 17587	Siegfried Hiltebrandt et Ludwig Bonnet	Boucle de sectionnement a une ou deux branches pour resertoscope
12	00/00/78	Gastroenterology, Vol. 74, No. 3, 527-534, 1978	J.R.A. Piercey, M.D., D.C. Auth, Ph.D, P.E., F.E. Silverstein, M.D., H.R. Willard, Ph.D, M.B. Dennis, D.V.M., D.M. Ellefson, B.S., D.M. Davis, M.S.E.E., R.L. Protell, M.D. and C.E. Rubin, M.D.	Electrosurgical Treatment of Experimental Bleeding Canine Gastric Ulcers: Development and testing of a computer control and a better electrode
13	02/21/78	US 4,074,718	Charles F. Morrison, Jr.	Electrosurgical Instrument
14	06/06/78	US 4,092,986	Max Schneiderman	Constant Output Electrosurgical Unit
15	09/26/78	US 4,116,198 and its file history	Eberhard Roos	Electro-Surgical Device
16	11/00/79	Digestive Diseases and Sciences, Vol. 24, No. 11, 845-848	M.B. Dennis, J. Peoples, R. Hulett, D.C. Auth, R.L. Protell, C.E. Rubin, and F.E. Silverstein	Evolution of Electrofulguration in Control of Bleeding of Experimental Gastric Ulcers

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
17	01/01/80	US 4,181,131	Hisao Ogiu	High Frequency Electrosurgical Instrument for Cutting Human Body Cavity Structures
18	01/22/80	US 4,184,492	Hans H. Meinke, Gerhard Flachenecker, Karl Fastenmeier, Friedrich Landstorfer, Heinz Lidenmeier	Safety Circuitry for High Frequency Cutting and Coagulating Devices
19	11/11/80	US 4,232,676	Andrew Herczog	Surgical Cutting Instrument
20	02/03/81	US 4,248,231	Andrew Herczog and James A. Murphy	Surgical Cutting Instrument
21	02/00/82	CRC Press, American Heart Journal, Vol. 117, 332-341	Kevin J. Barry, MS, Jonathan Kaplan, MD, Raymond J. Connolly, Ph.D, Paul Nardella, BS, Benjamin I. Lee, MD, Gary J. Becker, MD, Bruce F. Waller, MD, and Allan D. Callow, MD, Ph.D	The effect of radiofrequency-generated thermal energy on the mechanical and histologic characteristics of the arterial wall in vivo: Implications for radiofrequency angioplasty
22	04/27/82	US 4,326,529	James D. Doss and Richard L. Hutson	Corneal-Shaping Electrode
23	04/26/83	US 4,381,007	James D. Doss	Multipolar Corneal-Shaping Electrode with Flexible Removable Skirt
24	00/00/84	Gut, 25, 1424-1431	C.P. Swain, TN Mills, E. Shemesh, Julia M. Dark, M.R. Lewin, J.S. Clifton, T.C. Northfield, P.B. Cotton, and P.R. Salmon	Which Electrode? A comparison of four endoscopic methods of electrocoagulation in experimental bleeding ulcers

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
25	00/00/85	Urological Research 13:99-102	J.W.A. Ramsay, N.A. Shepherd, M. Butler, P.T. Gosling, R.A. Miller, D.M.A. Wallace, H.N. Whitfield	A Comparison of Bipolar and Monopolar Diathermy Probes in Experimental Animals
26	06/00/85	JACC Vol. 5, No. 6, 1382-6	Cornelis J. Slager, MSc, Catharina E. Essed, MD, Johan C.H. Schuurbiers, BSc, Nicolaas Bom, Ph.D, Patrick W. Serruys, MD, Geert T. Meester, MD, FACC	Vaporization of Atherosclerotic Plaques by Spark Erosion
27	10/22/85	US 4,548,207	Harry G. Reimels	Disposable Coagulator
28	05/27/86	US 4,590,934	Jerry L. Malis, Leonard I. Malis, Robert R. Acorcey, David Solt	Bipolar Cutter/Coagulator
29	00/00/87	Kardiologie, Kardiol.76: Supp. 6, 67-71 (1987)	C.J. Slager, A.C. Phaff, C.E. Essed, J.C.H. Schuurbiers, N. Bom, V.A. Vandenbroucke, and P.W. Serruys	Spark Erosion of Arteriosclerotic Plaques
30	04/28/87	US 4,660,571	Stanley R. Hess, Terri Kovacs	Percutaneous Lead Having Radially Adjustable Electrode
31	06/23/87	US 4,674,499	David S.C. Pao	Coaxial Bipolar Probe
32	07/00/88	Valleylab Part Number 945 100 102 A	Valleylab, Inc.	Surgistat Service Manual
33	11/22/88	US 4,785,823	Philip E. Eggers, Robert F. Shaw	Methods And Apparatus For Performing In Vivo Blood Thermodilution Procedures
34	00/00/89	SPIE Vol. 1068 Catheter-based Sensing and Imaging Technology	Paul C. Nardella	Radio Frequency Energy and Impedance Feedback

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
35	00/00/89	The Organizing Committee of the 7th World Congress on Endourology and ESWL Foundation for Advancement of International Science	Robert Tucker and Stefan Loening	A Bipolar Electrosurgical Turp Loop
36	02/21/89	US 4,805,616	David S.C. Pao	Bipolar Probes for Ophthalmic Surgery and Methods of Performing Anterior Capsulotomy
37	03/00/89	Journal of Urology Vol. 141, 662-665	Robert D. Tucker, Eugene V. Kramolowsky, Eric Bedell and Charles E. Platz	A Comparison of Urologic Application of Bipolar Versus Monopolar Five French Electrosurgical Probes
38	04/00/89	JACC Vol. 13 No. 5, 1167-75	Benjamin I. Lee, MD, FACC, Gary J. Becker, MD, Bruce F. Waller, MD, FACC, Kevin J. Barry, MS, Raymond J. Connolly, Ph.D, Jonathan Kaplan, MD, Alan R. Shapiro, MS, Paul C. Nardella, BS	Thermal Compression and Molding of Atherosclerotic Vascular Tissue With Use of Radiofrequency Energy: Implications for Radiofrequency Balloon Angioplasty
39	04/25/89	US 4,823,791	Frank D. D'Amelio, Dawn M. DeLemos, Dominick G. Esposito, Michelle D. Maxfield, Claude E. Petruzzi, Robert H. Quint	Electrosurgical Probe Apparatus
40	05/23/89	US 4,832,048	Donald Cohen	Suction Ablation Catheter
41	00/00/90	Urological Research 18:291-294	R.D. Tucker, E.V. Kramolowsky, and C.E. Platz	In vivo effect of 5 French bipolar and monopolar electrosurgical probes on the porcine bladder

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Auth r	Title
42	02/00/90	Journal of Urology Vol. 143, 275-277	Eugene V. Kramolowsky and Robert D. Tucker	Use of 5F Bipolar Electrosurgical Probe in Endoscopic Urologiical Procedures
43	04/05/90	WO 90/03152	John Considine, John Colin	Electro-surgical Apparatus for Removing Tumours from Hollow Organs of the Body
44	05/01/90	US 4,920,978	David P. Colvin	Method and Apparatus for the Endoscopic Treatment of Deep Tumors Using RF Hyperthermia
45	06/05/90	US 4,931,047	Alan Broadwin, Charles Vassallo, Joseph N. Logan, Robert W. Hornlein	Method and Apparatus For Providing Enhanced Tissue Fragmentation And/Or Hemostasis
46	06/26/90	US 4,936,281	Peter Stasz	Ultrasonically Enhanced RF Ablation Catheter
47	10/30/90	US 4,966,597	Eric R. Cosman	Thermometric Cardiac Tissue Ablation Electrode with Ultra-Sensitive Temperature Detection
48	12/11/90	US 4,976,711	David J. Parins, Mark A. Rydell, Peter Stasz	Ablation Catheter With Selectively Deployable Electrodes
49	12/25/90	US 4,979,948	Lesslie A. Geddes, Marvin H. Hinds, Joe D. Bourland, William D. Voorhees	Method and Apparatus for Thermally Destroying A Layer of An Organ
50	03/21/91	DE 3930451 A1	Ellen Hoffmann, Gerhard, Steinbeck, Rudi Mattmuller	Vorrichtung für die Hochfrequenzkoagulation von biologischem Gewebe
51	04/16/91	US 5,007,908	Mark A. Rydell	Electrosurgical Instrument Having Needle Cutting Electrode And Spot-Coag Electrode
52	04/23/91	US 5,009,656	Harry G. Reimels	Bipolar Electrosurgical Instrument
53	07/30/91	US 5,035,696	Mark A. Rydell	Electrosurgical Instrument for Conducting Endoscopic Retrograde Sphincterotomy

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
54	09/00/91	Journal of Urology Vol. 146, 669	Eugene V. Kramolowsky and Robert D. Tucker	The Urological Application of Electrosurgery
55	09/10/91	US 5,047,026	Mark A. Rydell	Electrosurgical Implement For Tunneling Through Tissue
56	09/10/91	US 5,047,027	Mark A. Rydell	Tumor Resector
57	10/07/91	Bipolar Laparoscopic Cholecystectomy Lecture	Dr. Olsen	Bipolar Laparoscopic Cholecystectomy
58	01/14/92	US 5,080,660	Terrence J. Buelna	Electrosurgical Electrode
59	01/28/92	US 5,084,044	Robert H. Quint	Apparatus for Endometrial Ablation and Method of Using Same
60	02/04/92	US 5,085,659	Mark A. Rydell	Biopsy Device With Bipolar Coagulation Capability
61	02/18/92	US 5,088,997	Louis Delahuerga, Robert B. Stoddard, Michael S. Klicek	Gas Coagulation Device
62	03/24/92	US 5,098,431	Mark A. Rydell	RF Ablation Catheter
63	04/28/92	US 5,108,391	Gerhard Flachenecker, Karl Fastenmeier, Heinz Lindenmeier	High-Frequency Generator For Tissue Cutting And For Coagulating In High-Frequency Surgery
64	05/12/92	US 5,112,330	Shinichi Nishigaki, Shiro Bito	Resectoscope Apparatus
65	06/16/92	US 5,122,138	Kim H. Manwaring	Tissue Vaporizing Accessory and Method for an Endoscope
66	12/01/92	US 5,167,659	Naoki Ohtomo; Shizuo Ninomiya	Blood Coagulating Apparatus
67	12/15/92	US 5,171,311	Mark A. Rydell, David J. Parins, Steven W. Berhow	Percutaneous Laparoscopic Cholectectomy Instrument
68	03/30/93	US 5,197,963	David J. Parins	Electrosurgical Instrument with Extendable Sheath for Irrigation and Aspiration
69	05/04/93	US 5,207,675	Jerome Canady	Surgical Coagulation Device

#	Issue/ Pub'n Date	Patent Number/ Publicati n	Invent r/Author	Title
70	06/08/93	US 5,217,459	William Kamerling	Method and Instrument for Performing Eye Surgery
71	04/26/94	US 5,306,238	Richard P. Fleenor	Laparoscopic Electrosurgical Pencil
72	06/13/95	US 5,423,882	Warren M. Jackman, Wilton W. Webster, Jr.	Catheter Having Electrode With Annular Recess and Method of Using Same
73	10/03/95	US 5,454,809	Michael Janssen	Electrosurgical Catheter And Method For Resolving Artherosclerotic Plaque By Radio Frequency Sparking

1. **U.S. Patent No. 5,697,536 ("the '536 patent")**

A. **Claim 45**

Smith & Nephew contends that claim 45 of the '536 patent is anticipated by at least each of the following references: 3, 8, 9, 12, 15, 16, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 31, 35, 36, 37, 38, 41, 42, 43, 45, 46, 48, 49, 51, 52, 53, 54, 57, 65, 66, 67, 70.

Smith & Nephew also contends that claim 45 of the '536 patent would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least each of the following combinations of references, which Smith & Nephew contends would have been combined for at least the following reasons:

Combination	Motivation to Combine
Any one or more of 1, 4, 5, 6, 7, 10, 11, 13, 17, 30, 33, 39, 40, 44, 50, 55, 56, 58, 60, 61, 62, 64, 68, 69, 71, 72, 73 with any other one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 34, 47 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

Combination	Motivation t Combine
59 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

Attached as Exhibit A are tables showing, for each reference, where the limitations of claim 45 of the '536 patent may be found in the reference.

Smith & Nephew also contends that claim 45 of the '536 patent is invalid for the reasons given in Ethicon's Motion for Summary Judgment of Invalidity for Failure to Satisfy the Requirements of 35 U.S.C. §§ 102-103, Ethicon's Motion for Partial Summary Judgment of Invalidity for Failure to Satisfy the Requirements of 35 U.S.C. § 112, and supporting papers filed in *ArthroCare Corp. v. Ethicon, Inc.*, Case No. C-98-0609 WHO (N.D. Cal.).

2. <u>U.S. Patent No. 5,697,882 ("the 882 patent")</u>

A. <u>Claim 28</u>

Smith & Nephew contends that claim 28 of the '882 patent is anticipated by at least each of the following references: 5, 8, 12, 15, 21, 25, 26, 29, 41, 42, 44, 45, 57, 61, 65.

Smith & Nephew also contends that claim 28 of the '882 patent would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least each of the following combinations of references, which Smith & Nephew contends would have been combined for at least the following reasons:

Combination	Motivation to Combine
Any one or more of 1, 6, 9, 11, 13, 39, 58, 64 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 3, 4, 7, 10, 16, 17, 18, 19, 20, 22, 23, 24, 27, 28, 30, 31, 33, 34, 35, 36, 37, 38, 40, 43, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 60, 62, 66, 67, 68, 69, 70, 71, 72, 73 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 59, 63 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

Attached as Exhibit B are tables showing, for each reference, where the limitations of claim 28 of the '882 patent may be found in the reference.

Smith & Nephew further contends that claim 28 of the '882 patent is also invalid as indefinite under 35 U.S.C. § 112 ¶ 2.

Smith & Nephew also contends that claim 28 of the '882 patent is invalid for the reasons given in Ethicon's Motion for Summary Judgment of Invalidity for Failure to Satisfy the Requirements of 35 U.S.C. §§ 102-103, Ethicon's Motion for Partial Summary Judgment of Invalidity for Failure to Satisfy the Requirements of 35 U.S.C. § 112, and supporting papers filed in *ArthroCare Corp. v. Ethicon, Inc.*, Case No. C-98-0609 WHO (N.D. Cal.).

3. **U.S. Patent No. 6,224,592 ("the '592 patent")**

A. **Claim 1**

Smith & Nephew contends that claim 1 of the '592 patent is anticipated by at least each of the following references: 8, 15, 23, 26, 30, 31, 33, 34, 46, 48, 51, 62, 72.

Smith & Nephew also contends that claim 1 of the '592 patent would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least

each of the following combinations of references, which Smith & Nephew contends would have been combined for at least the following reasons:

Combination	Motivation to Combine
Any one or more of 4, 5, 12, 16, 20, 21, 22, 24, 25, 29, 35, 36, 37, 38, 41, 42, 45, 53, 54, 55, 57, 61, 65, 66, 67, 70 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 1, 7, 10, 17, 44, 56, 68, 69, 71 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 3, 9, 18, 19, 27, 28, 40, 43, 47, 49, 50, 52, 60, 73 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 6, 11, 13, 39, 58, 64 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 59, 63 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

Attached as Exhibit C are tables showing, for each reference, where the limitations of the asserted claims of the '592 patent may be found in the reference.

Smith & Nephew further contends that claim 1 of the '592 patent is also invalid as indefinite under 35 U.S.C. § 112 ¶ 2.

B. <u>Claim 23</u>

Smith & Nephew contends that claim 23 of the '592 patent is anticipated by at least each of the following references: 8, 15, 30, 31, 33, 34, 46, 48, 51, 62, 72.

Smith & Nephew also contends that claim 23 of the '592 patent would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least each of the following combinations of references, which Smith & Nephew contends would have been combined for at least the following reasons:

Combination	Motivati n to Combine
Any one or more of 4, 5, 12, 16, 24, 25, 36, 37, 38, 41, 42, 53, 61, 65, 67, 70 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 2, 9, 18, 19, 20, 21, 22, 25, 27, 28, 29, 35, 40, 43, 45, 47, 49, 50, 52, 54, 57, 60, 66, 73 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 1, 7, 10, 17, 44, 56 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 6, 9, 11, 13, 30, 39, 40, 47, 50, 58, 62, 64, 68, 69, 71, 73 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 6, 11, 13, 39, 58, 64, 68, 69, 71 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 59, 63 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 23, 26 with any one or more of the other anticipating references listed above.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 23, 26 with any one or more of 4, 5, 12, 16, 24, 25, 36, 37, 38, 41, 42, 53, 61, 65, 67, 70.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.
Any one or more of 23, 26 with any one or more of 1, 7, 10, 17, 44, 56.	Each reference is directed to the same problem – applying electrical energy to a target site on a patient's body structure.

4. **All Patents**

Smith & Nephew also contends that the asserted claims of the '536, '882 and '592 patents are also invalid under 35 U.S.C. § 102(f) and/or § 116 because of improper inventorship.

Smith & Nephew's investigation into its defenses is continuing, and it reserves the right to assert additional invalidity defenses as discovery progresses.

EXHIBIT A

The '536 Patent	Reference No. 1
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 1 discloses a high frequency power supply, see, e.g., col. 1, lines 15-27.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 1 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col.1, lines 40-55, Fig.1.
an electrode terminal disposed near the distal end, and	Reference No. 1 discloses an electrode terminal disposed near the distal end, see, e.g., col. 1, lines 40-55, Fig. 1.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 1 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 1, lines 40-55, Fig. 1.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 1 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 1, lines 15-27.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 2
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 2 discloses a high frequency power supply, see, e.g., p 207.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	
an electrode terminal disposed near the distal end, and	
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 2 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 207.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 3
45. An electrosurgical system for applying electrical energy to a target site on a structure within r on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 3 discloses a high frequency power supply, see, e.g., col. 3, line 48 - col. 4, line 14.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 3 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 8, line 10–col. 9, line 8.
an electrode terminal disposed near the distal end, and	Reference No. 3 discloses an electrode terminal disposed near the distal end, see, e.g., col. 8, line 10–col. 9, line 8.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 3 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 8, line 10–col. 9, line 8.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 3 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 3, line 48 - col. 4, line 14.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 3 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 9, lines 9-25.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 3 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 9, lines 9-25.

The '536 Patent	Reference No. 4
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 4 discloses a high frequency power supply, see, e.g., col. 1, line 5–col. 2, line 2.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 4 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 1, line 5–col. 2, line 2.
an electrode terminal disposed near the distal end, and	Reference No. 4 discloses an electrode terminal disposed near the distal end, see, e.g., col 1, line 5–col. 2, line 2.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 4 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 1, line 5–col. 2, line 2.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 4 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 1, line 5–col. 2, line 2.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and th el ctrode terminal.	

The '536 Patent	Reference No. 5
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 5 discloses a high frequency power supply, see, e.g., pages 58-60.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 5 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., pages 58-60.
an electrode terminal disposed near the distal end, and	Reference No. 5 discloses an electrode terminal disposed near the distal end, see, e.g., pages 58-60.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 5 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., pages 58-60.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 5 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., pages 58-60.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 6
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 6 discloses a high frequency power supply, see, e.g., col. 3, lines 3-7.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 6 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 3, lines 3-7, Fig. 1-2.
an electrode terminal disposed near the distal end, and	Reference No. 6 discloses an electrode terminal disposed near the distal end, see, e.g., col. 3, lines 3-7, Fig. 1-2.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 6 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 3, lines 3-7, Fig 1-2.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 6 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 3, lines 3-7.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 7
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 7 discloses a high frequency power supply, see, e.g., col. 2, lines 44-66.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 7 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 4, lines 4-19; col. 2, lines 44-66.
an electrode terminal disposed near the distal end, and	Reference No. 7 discloses an electrode terminal disposed near the distal end, see, e.g.,col. 4, lines 4-19; col. 2, lines 44-66.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 7 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 4, lines 4-19; col. 2, lines 44-66.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 7 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 44-66.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 8
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 8 discloses a high frequency power supply, see, e.g., p. 1.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 8 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 3, 7.
an electrode terminal disposed near the distal end, and	Reference No. 8 discloses an electrode terminal disposed near the distal end, see, e.g., p. 3, 7.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 8 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 3, 7.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 8 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 1.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 8 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 4-5.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 8 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 4-5.

The '536 Patent	Reference No. 9
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 9 discloses a high frequency power supply, see, e.g., col. 2, lines 33-52.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 9 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 40-63.
an electrode terminal disposed near the distal end, and	Reference No. 9 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 40-63.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 9 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 40-63.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 9 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 33-52.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 9 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 2, lines 40-63.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 9 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 2, lines 40-63.

The '536 Patent	Reference No. 10
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 10 discloses a high frequency power supply, see, e.g., col. 4, lines 18-28.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 10 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 4, lines 18-28.
an electrode terminal disposed near the distal end, and	Reference No. 10 discloses an electrode terminal disposed near the distal end, see, e.g., col 4, lines 18-28.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 10 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 4, lines 18-28.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 10 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 4, lines 18-28.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 11
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 11 discloses a high frequency power supply, see, e.g., p. 2.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 11 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 2.
an electrode terminal disposed near the distal end, and	Reference No. 11 discloses an electrode terminal disposed near the distal end, see, e.g., p. 2.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 11 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 2.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 11 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 2.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 12
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 12 discloses a high frequency power supply, see, e.g., p. 528.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 12 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 530.
an electrode terminal disposed near the distal end, and	Reference No. 12 discloses an electrode terminal disposed near the distal end, see, e.g., p. 530.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 12 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 530.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 12 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 528.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 12 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 529.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 12 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 529.

The '536 Patent	Reference No. 13
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 13 discloses a high frequency power supply, see, e.g., col. 4, line 15; col 7, lines 38-50.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 13 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 6, lines 55-70.
an electrode terminal disposed near the distal end, and	Reference No. 13 discloses an electrode terminal disposed near the distal end, see, e.g., col. 6, lines 55-70.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 13 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 6, lines 55-70.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 13 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 4, line 15; col. 7, lines 38-50.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 15
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 15 discloses a high frequency power supply, see, e.g., col. 1, lines 5-17.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 15 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 4, line 51-col. 5, line 20.
an electrode terminal disposed near the distal end, and	Reference No. 15 discloses an electrode terminal disposed near the distal end, see, e.g., col. 4, line 51-col. 5, line 20.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 15 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 4, line 51-col. 5, line 20.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 15 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 1, lines 5-17.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 15 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 1, lines 52-56; col. 7, lines 59-62.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 15 the electrically conducting fluid generates a current flow path between the return electrode and the lectrode terminal, see, e.g., col. 1, lines 52-56; c l. 7, lines 59-62.

The '536 Patent	Reference No. 16
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 16 discloses a high frequency power supply, see, e.g., pp. 845-46.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 16 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 845.
an electrode terminal disposed near the distal end, and	Reference No. 16 discloses an electrode terminal disposed near the distal end, see, e.g., p. 845.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 16 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 845.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 16 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., pp. 845-46.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 16 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 846.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 16 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 846.

The '536 Patent	Reference No. 17
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 17 discloses a high frequency power supply, see, e.g., col. 6, lines 1-30.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 17 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 6, lines 1-30.
an electrode terminal disposed near the distal end, and	Reference No. 17 discloses an electrode terminal disposed near the distal end, see, e.g., col. 6, lines 1-30.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 17 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 6, lines 1-30.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 17 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 6, lines 1-30.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 18
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 18 discloses a high frequency power supply, see, e.g., col. 1, lines 12-37.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 18 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 1, lines 12-37.
an electrode terminal disposed near the distal end, and	Reference No. 18 discloses an electrode terminal disposed near the distal end, see, e.g., col. 1, lines 12-37.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 18 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 1, lines 12-37.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 18 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 1, lines 12-37.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 18 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 3, line 67 – col. 4, line 3.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 18 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 3, line 67 – col. 4, line 3.

The '536 Patent	Reference No. 19
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 19 discloses a high frequency power supply, see, e.g., col. 2, lines 33-46.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 19 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 33-46.
an electrode terminal disposed near the distal end, and	Reference No. 19 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 33-46.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 19 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 33-46.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 19 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 33-46.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 19 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 1, lines 34-38.
the electrically conducting fluid generates a current flow path between the return electrode and the	In Reference N . 19 the electrically conducting fluid generates a current flow path between th

electrode terminal.	return electrode and the electrode terminal, see, e.g., col. 1, lines 34-38.

The '536 Patent	Reference No. 20
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 20 discloses a high frequency power supply, see, e.g., col. 2, lines 35-58.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 20 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 35-58.
an electrode terminal disposed near the distal end, and	Reference No. 20discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 35-58.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 20 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 35-58.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 20 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 35-58.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 20 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 2, lines 35-58.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 20 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 2, lines 35-58.

The '536 Patent	Reference No. 21
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 21 discloses a high frequency power supply, see, e.g., p. 333.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 21 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 333.
an electrode terminal disposed near the distal end, and	Reference No. 21 discloses an electrode terminal disposed near the distal end, see, e.g., p. 333.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 21 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 333.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 21 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 333.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 21 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 334.
the electrically conducting fluid generates a current flow path between the return electrode and the	In Reference No. 21 the electrically conducting fluid generates a current flow path between the

electrode terminal.	return electrode and the electrode terminal, see, e.g., p. 334.

The '536 Patent	Reference No. 22
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 22 discloses a high frequency power supply, see, e.g., col. 2, lines 21-58.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 22 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 21-58.
an electrode terminal disposed near the distal end, and	Reference No. 22 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 21-58.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 21 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 21-58.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 22 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 21-58.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 22 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 2, lines 21-58.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 22 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 2, lines 21-58.

The '536 Patent	Reference No. 23
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 23 discloses a high frequency power supply, see, e.g., col. 2, lines 42-68; col. 3, lines 34-38.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 23 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 42-68; col. 3, lines 34-38.
an electrode terminal disposed near the distal end, and	Reference No. 23 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 42-68; col. 3, lines 34-38.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 23 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 42-68; col. 3, lines 34-38.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 23 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 42-68; col. 3, lines 34-38.

an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 23 discloses an electrically conducting fluid supply for directing electrically c nducting fluid to the target site, see, e.g., c l. 2, lines 42-68; col. 3, line 66.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 23 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 2, lines 42-68; col. 3, lines 34-38.

The '536 Patent	Reference No. 24
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 24 discloses a high frequency power supply, see, e.g., p. 1425.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 24 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 1425.
an electrode terminal disposed near the distal end, and	Reference No. 24 discloses an electrode terminal disposed near the distal end, see, e.g., p. 1425.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 24 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 1425.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 24 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 1425.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 24 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 1425.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 24 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 1425.

The '536 Patent	Reference No. 25
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 25 discloses a high frequency power supply, see, e.g., p. 99.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 25 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 99.
an electrode terminal disposed near the distal end, and	Reference No. 25 discloses an electrode terminal disposed near the distal end, see, e.g., p. 99.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 25 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 99.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 25 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 99.
an electrically conducting fluid supply f r directing	Reference No. 25 discloses an electrically

electrically conducting fluid to the target site such that	conducting fluid supply for directing lectrically conducting fluid to the target site, see, e.g., p. 99.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 25 the electrically conducting fluid generates a current flow path between th return electrode and the electrode terminal, see, e.g., p. 99.

The '536 Patent	Reference No. 26
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 26 discloses a high frequency power supply, see, e.g., p. 1383.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 26 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 1383.
an electrode terminal disposed near the distal end, and	Reference No. 26 discloses an electrode terminal disposed near the distal end, see, e.g., p. 1383.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 26 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 1383.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 26 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 1383.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 26 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 1383.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 26 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 1383.

The '536 Patent	Reference No. 27
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 27 discloses a high frequency power supply, see, e.g., col. 2, lines 38-66.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 27 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 38-66.
an electrode terminal disposed near the distal end, and	Reference No. 27 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 38-66.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 27 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 38-66.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 27 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 38-66.
an electrically conducting fluid supply f r directing electrically conducting fluid to the target site such	Reference No. 27 discloses an electrically conducting fluid supply for directing electrically

that	conducting fluid to the target site, see, e.g., col. 3, lines 48-53.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 27 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 3, lines 48-53.

The '536 Patent	Reference No. 28
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 28 discloses a high frequency power supply, see, e.g., col. 2, lines 23-33.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 28 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 23-33.
an electrode terminal disposed near the distal end, and	Reference No. 28 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 23-33.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 28 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 23-33.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 28 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 23-33.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 28 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 2, line 18.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 28 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 2, line 18.

The '536 Patent	Reference No. 29
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 29 discloses a high frequency power supply, see, e.g., p. 67-68.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 29 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 67-68.
an electrode terminal disposed near the distal end, and	Reference No. 29 discloses an electrode terminal disposed near the distal end, see, e.g., p. 67-68.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 29 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 67-68.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 29 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 67-68.
an electrically conducting fluid supply for directing	Reference No. 29 discloses an electrically

electrically conducting fluid to the target site such that	conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 68.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 29 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 68.

The '536 Patent	Reference No. 30
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 30 discloses a high frequency power supply, see, e.g., col. 4, line 32 - col. 5, line 10.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 30 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 4, line 32 - col. 5, line 10.
an electrode terminal disposed near the distal end, and	Reference No. 30 discloses an electrode terminal disposed near the distal end, see, e.g., col. 4, line 32 - col. 5, line 10.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 30 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 4, line 32 - col. 5, line 10.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 30 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 4, line 32 - col. 5, line 10.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 31
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 31 discloses a high frequency power supply, see, e.g., col. 2, lines 45-58.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 31 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 45-58.
an electrode terminal disposed near the distal end, and	Reference No. 31 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 45-58.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 31 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 45-58.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 31 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 45-58.
an electrically c nducting fluid supply f r directing electrically conducting fluid to the target site such	Reference No. 31 discloses an lectrically conducting fluid supply for directing electrically

that	conducting fluid t the target site, see, e.g., col. 3, line 31; col. 7, line 65.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 31 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 3, line 31; col. 7, line 65.

The '536 Patent	Reference No. 33
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 33 discloses a high frequency power supply, see, e.g., col. 2, lines 45-69.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 33 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 45-69.
an electrode terminal disposed near the distal end, and	Reference No. 33 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 45-69.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 33 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 45-69.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 33 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 45-69.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 34
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 34 discloses a high frequency power supply, see, e.g., p. 42.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	
an electrode terminal disposed near the distal end, and	
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 34 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 42.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the	

electrode terminal.	

The '536 Patent	Reference No. 35
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 35 discloses a high frequency power supply, see, e.g., p. 248.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 35 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 248.
an electrode terminal disposed near the distal end, and	Reference No. 35 discloses an electrode terminal disposed near the distal end, see, e.g., p. 248.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 35 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 248.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 35 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 248.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 35 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 248.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 35 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 248.

The '536 Patent	Reference No. 36
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 36 discloses a high frequency power supply, see, e.g., col. 4, lines 4-39.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 36 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 4, lines 4-39.
an electrode terminal disposed near the distal end, and	Reference No. 36 discloses an electrode terminal disposed near the distal end, see, e.g., col. 4, lines 4-39.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 36 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 4, lines 4-39.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 36 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 4, lines 4-39.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 36 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 7, lines 30-32.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 36 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g.,

	col. 7, lines 30-32.

The '536 Patent	Reference No. 37
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 37 discloses a high frequency power supply, see, e.g., p. 662-63.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 37 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 662-63.
an electrode terminal disposed near the distal end, and	Reference No. 37 discloses an electrode terminal disposed near the distal end, see, e.g., p. 662-63.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 37 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 662-63.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 37 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 662-63.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 37 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 663.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 37 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 663.

The '536 Patent	Reference No. 38
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 38 discloses a high frequency power supply, see, e.g., p. 1168.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 38 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 1168-1169.
an electrode terminal disposed near the distal end, and	Reference No. 38 discloses an electrode terminal disposed near the distal end, see, e.g., p. 1168-1169.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 38 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 1168-1169.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 38 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 1168.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 38 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 1168.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 38 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 1168.

The '536 Patent	Reference No. 39
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 39 discloses a high frequency power supply, see, e.g., col. 5, lines 1-47.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 39 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 5, lines 1-47.
an electrode terminal disposed near the distal end, and	Reference No. 39 discloses an electrode terminal disposed near the distal end, see, e.g., col. 5, lines 1-47.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 39 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 5, lines 1-47.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 39 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 5, lines 1-47.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 40
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 40 discloses a high frequency power supply, see, e.g., col. 2, lines 62-65.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 40 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 19-22.
an electrode terminal disposed near the distal end, and	Reference No. 40 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 19-22.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 40 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 19-22.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 40 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 62-65.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 41
45. An electrosurgical system f r applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 41 discloses a high frequency power supply, see, e.g., p. 291.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 41 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 292.
an electrode terminal disposed near the distal end, and	Reference No. 41 discloses an electrode terminal disposed near the distal end, see, e.g., p. 292.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 41 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 292.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 41 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 291.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 41 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 291.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 41 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 291.

The '536 Patent	Reference No. 42
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 42 discloses a high frequency power supply, see, e.g., p. 275.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 42 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 275.
an electrode terminal disposed near the distal end, and	Reference No. 42 discloses an electrode terminal disposed near the distal end, see, e.g., p. 275.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 42 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 275.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 42 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 275.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 42 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 275.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 42 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 275.

The '536 Patent	Reference N . 43
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 43 discloses a high frequency power supply, see, e.g., p. 2.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 43 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 8, 10.
an electrode terminal disposed near the distal end, and	Reference No. 43 discloses an electrode terminal disposed near the distal end, see, e.g., p. 8, 10.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 43 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 8, 10.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 43 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 2.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 43 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 11.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 43 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 11.

The '536 Patent	Reference No. 44
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 44 discloses a high frequency power supply, see, e.g., col. 2, lines 26-51.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 44 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 26-51.
an electrode terminal disposed near the distal end, and	Reference No. 44 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 26-51.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 44 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 26-51.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 44 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 26-51.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrod terminal.	

The '536 Patent	Reference No. 45
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 45 discloses a high frequency power supply, see, e.g., col. 4, line 21 - col. 5, line 6.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 45 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 4, line 40.
an electrode terminal disposed near the distal end, and	Reference No. 45 discloses an electrode terminal disposed near the distal end, see, e.g., col. 4, line 40.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 45 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 4, line 40.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 45 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 4, line 21 - col. 5, line 6.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 45 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 3, lines 48-55.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 45 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 3, lines 48-55.

The '536 Patent	Reference No. 46
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 46 discloses a high frequency power supply, see, e.g., col. 2, lines 31 - 53.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 46 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, line 31 - 53.
an electrode terminal disposed near the distal end, and	Reference No. 46 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, line 31 - 53.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 44 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, line 31 - 53.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 46 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, line 31 - 53.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 46 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 6, line 42.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 46 the electrically conducting fluid generates a current flow path between th return electrode and the electrode terminal, see, e.g.,

	col. 6, line 42.

The '536 Patent	Reference N . 47
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 47 discloses a high frequency power supply, see, e.g., col. 1, line 34.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	
an electrode terminal disposed near the distal end, and	
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 47 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 1, line 34.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 48
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 48 discloses a high frequency power supply, see, e.g., col. 2, line 28.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 48 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, line 28.
an electrode terminal disposed near the distal end, and	Reference No. 48 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, line 28.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 48 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, line 28.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 48 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, line 28.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 48 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 6, line 28; col. 4, line 6.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 48 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 6, line 28; col. 4, line 6.

The '536 Patent	Reference No. 49
45. An electrosurgical system f r applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 49 discloses a high frequency power supply, see, e.g., col. 1, line 55.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 49 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 1, line 55.
an electrode terminal disposed near the distal end, and	Reference No. 49 discloses an electrode terminal disposed near the distal end, see, e.g., col. 1, line 55.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 49 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 1, line 55.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 49 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 1, line 55.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 49 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 1, line 65.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 49 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 1, line 65.

The '536 Patent	Reference No. 50
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 50 discloses a high frequency power supply, see, e.g., col. 2, lines 21-63.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 50 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 21-63.
an electrode terminal disposed near the distal end, and	Reference No. 50 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 21-63.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 50 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 21-63.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 50 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 21-63.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 51
45. An electrosurgical system for applying electrical energy to a target site on a structure within r on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 51 discloses a high frequency power supply, see, e.g., col. 2, line 41 - col. 3, line 58.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 51 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, line 41 - col. 3, line 58.
an electrode terminal disposed near the distal end, and	Reference No. 51 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, line 41 - col. 3, line 58.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 51 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, line 41 - col. 3, line 58.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 51 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, line 41 - col. 3, line 58.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 51 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 3, line 53.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 51 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 3, line 53.

The '536 Patent	Reference No. 52
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 52 discloses a high frequency power supply, see, e.g., col. 3, lines 1-32.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 52 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 3, lines 1-32.
an electrode terminal disposed near the distal end, and	Reference No. 52 discloses an electrode terminal disposed near the distal end, see, e.g., col. 3, lines 1-32.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 51 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 3, lines 1-32.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 52 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 3, lines 1-32.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 52 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 2, line 26.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 52 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g.,

	col. 2, line 26.

The '536 Patent	Reference No. 53
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 53 discloses a high frequency power supply, see, e.g., col. 2, lines 28-55.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 53 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 28-55.
an electrode terminal disposed near the distal end, and	Reference No. 53 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, line 28.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 53 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 28-55.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 53 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 28-55.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 53 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 3, line 63; col. 2, line 1.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 53 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 3, line 63; col. 2, line 1.

The '536 Patent	Reference No. 54
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 54 discloses a high frequency power supply, see, e.g., p. 670.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 54 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 669.
an electrode terminal disposed near the distal end, and	Reference No. 54 discloses an electrode terminal disposed near the distal end, see, e.g., p. 669.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 54 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 669.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 54 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 670.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 54 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 672.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 54 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 672.

The '536 Patent	Reference No. 55
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 55 discloses a high frequency power supply, see, e.g., col. 2, lines 7-46.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 55 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, lines 7-46.
an electrode terminal disposed near the distal end, and	Reference No. 55 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, lines 7-46.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 55 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, lines 7-46.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 55 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, lines 7-46.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 56
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 56 discloses a high frequency power supply, see, e.g., col. 1, line 61 - col. 2, line 12.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 56 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 1, line 61 - col. 2, line 12.
an electrode terminal disposed near the distal end, and	Reference No. 56 discloses an electrode terminal disposed near the distal end, see, e.g., col. 1, line 61 - col. 2, line 12.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 56 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 1, line 61 - col. 2, line 12.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 56 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 1, line 61 - col. 2, line 12.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 57
45. An electrosurgical system f r applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 57 discloses a high frequency power supply, see, e.g., p. 3.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 57 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., p. 3.
an electrode terminal disposed near the distal end, and	Reference No. 57 discloses an electrode terminal disposed near the distal end, see, e.g., p. 3.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 57 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., p. 3.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 57 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., p. 3.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 57 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., p. 3.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 57 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., p. 6.

The '536 Patent	Reference No. 58
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 58 discloses a high frequency power supply, see, e.g., col. 3, lines 9-49.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 58 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 3, lines 9-49.
an electrode terminal disposed near the distal end, and	Reference No. 58 discloses an electrode terminal disposed near the distal end, see, e.g., col. 3, lines 9-49.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 58 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 3, lines 9-49.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 58 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 3, lines 9-49.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 59
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 59 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 3, lines 5-36.
an electrode terminal disposed near the distal end, and	Reference No. 59 discloses an electrode terminal disposed near the distal end, see, e.g., col. 3, lines 5-36.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 59 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 3, lines 5-36.
a return electrode electrically coupled to the electrosurgical power supply; and	
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 60
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 60 discloses a high frequency power supply, see, e.g., col. 4, line 45.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 60 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 3, line 35.
an electrode terminal disposed near the distal end, and	Reference No. 60 discloses an electrode terminal disposed near the distal end, see, e.g., col. 3, line 35.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 60 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 3, line 35.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 60 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 4, line 45.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 61
45. An electrosurgical system for applying electrical energy t a target site n a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 61 discloses a high frequency power supply, see, e.g., col. 3, line 30.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 61 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 3, line 30.
an electrode terminal disposed near the distal end, and	Reference No. 61 discloses an electrode terminal disposed near the distal end, see, e.g., col. 3, line 30.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 61 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 3, line 30.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 61 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 3, line 30.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 62
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 62 discloses a high frequency power supply, see, e.g., col. 2, line 35.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 62 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, line 20.
an electrode terminal disposed near the distal end, and	Reference No. 62 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, line 20.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 61 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, line 20.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 62 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, line 35.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 64
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 64 discloses a high frequency power supply, see, e.g., col. 2, line 5.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 64 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 4, line 25.
an electrode terminal disposed near the distal end, and	Reference No. 64 discloses an electrode terminal disposed near the distal end, see, e.g., col. 4, line 25.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 64 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 4, line 25.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 64 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, line 5.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 65
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 65 discloses a high frequency power supply, see, e.g., col. 5, line 34.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 65 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 5, line 34.
an electrode terminal disposed near the distal end, and	Reference No. 65 discloses an electrode terminal disposed near the distal end, see, e.g., col. 5, line 34.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 65 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 5, line 34.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 65 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 5, line 34.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 65 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 2, line 10; col. 6, line 65.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 65 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 2, line 10; col. 6, line 65.

The '536 Patent	Reference No. 66
45. An electrosurgical system for applying electrical energy t a target site on a structure within or on a patient's body, the system c mprising:	
a high frequency power supply;	Reference No. 66 discloses a high frequency power supply, see, e.g., col. 2, line 1.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 66 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 3, line 14.
an electrode terminal disposed near the distal end, and	Reference No. 66 discloses an electrode terminal disposed near the distal end, see, e.g., col. 3, line 14.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 64 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 3, line 14.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 66 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, line 1.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 66 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 2, line 10.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 66 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 2, line 10.

The '536 Patent	Reference No. 67
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 67 discloses a high frequency power supply, see, e.g., col. 2, line 35.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 67 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, line 35.
an electrode terminal disposed near the distal end, and	Reference No. 67 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, line 35.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 67 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, line 35.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 67 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, line 35.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 67 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 4, line 10.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 67 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g.,col. 4, line 10.

The '536 Patent	Reference N . 68
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 68 discloses a high frequency power supply, see, e.g., col. 3, line 25.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 68 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 3, line 25.
an electrode terminal disposed near the distal end, and	Reference No. 68 discloses an electrode terminal disposed near the distal end, see, e.g., col. 3, line 25.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 68 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 3, line 25.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 68 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 3, line 25.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 69
45. An electrosurgical system for applying electrical energy t a target site n a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 69 discloses a high frequency power supply, see, e.g., col. 3, line 20.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 69 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 3, line 20.
an electrode terminal disposed near the distal end, and	Reference No. 69 discloses an electrode terminal disposed near the distal end, see, e.g., col. 3, line 20.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 69 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 3, line 20.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 69 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 3, line 20.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 70
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 70 discloses a high frequency power supply, see, e.g., col. 2, line 38.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 70 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, line 38.
an electrode terminal disposed near the distal end, and	Reference No. 70 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, line 38.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 70 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, line 38.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 70 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, line 38.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	Reference No. 70 discloses an electrically conducting fluid supply for directing electrically conducting fluid to the target site, see, e.g., col. 3, line 1.
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	In Reference No. 70 the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal, see, e.g., col. 3, line 1.

The '536 Patent	Reference N . 71
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 71 discloses a high frequency power supply, see, e.g., col. 3, line 43 - col. 4, line 18.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 71 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., figs.
an electrode terminal disposed near the distal end, and	Reference No. 71 discloses an electrode terminal disposed near the distal end, see, e.g., figs.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 71 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., figs.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 71 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 3, line 43 - col. 4, line 18.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 72
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 72 discloses a high frequency power supply, see, e.g., col. 2, line 30.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 72 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 2, line 30.
an electrode terminal disposed near the distal end, and	Reference No. 72 discloses an electrode terminal disposed near the distal end, see, e.g., col. 2, line 30.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 72 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 2, line 30.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 72 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 2, line 30.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

The '536 Patent	Reference No. 73
45. An electrosurgical system for applying lectrical energy t a target site n a structure within r n a patient's body, the system comprising:	
a high frequency power supply;	Reference No. 73 discloses a high frequency power supply, see, e.g., col. 4, line 35.
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Reference No. 73 discloses an electrosurgical probe comprising a shaft having a proximal end and a distal end, see, e.g., col. 4, line 35.
an electrode terminal disposed near the distal end, and	Reference No. 73 discloses an electrode terminal disposed near the distal end, see, e.g., col. 4, line 35.
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Reference No. 73 discloses a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply, see, e.g., col. 4, line 35.
a return electrode electrically coupled to the electrosurgical power supply; and	Reference No. 73 discloses a return electrode electrically coupled to the electrosurgical power supply, see, e.g., col. 4, line 35.
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	

EXHIBIT B

The '882 Patent	Reference No. 1
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 1 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 1, lns. 15-27.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 2
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 2 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 207.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 2 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., pp. 206, 211.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 3
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 3 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 3, ln. 48 - col. 4 ln. 14.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 3 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 9, lns. 9-25.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablat the body structure without causing substantial tissue	

necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 4
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 4 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 1, ln. 5-col. 2, ln. 2.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 4 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 1, lns. 38-44, col. 1, lns. 11-15.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 5
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 5 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., pp. 58-60.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 5 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 58.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 5 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., p. 58.

The '882 Patent	Reference No. 6
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 6 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 3, lns. 3-7.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	
applying a high frequency voltage between the electrode terminal and the return electrode, th high	

frequency v ltage being sufficient t impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of th body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 7
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 7 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, lns. 44-66.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 7 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 3, lns. 33-44.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 8
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 8 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 1.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 8 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., pp. 1, 5.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 8 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., p. 1.

The '882 Patent	Reference No. 9
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 9 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, lns. 33-52.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	

applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 10
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 10 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 4, lns. 18-28.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 10 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 7, lns. 2-5.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 11
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 11 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 2.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 12
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 12 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 528.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 12 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 528.

applying a high frequency voltage between the electrode terminal and th return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate th body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 12 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., p. 528.

The '882 Patent	Reference No. 13
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 13 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 4, ln. 15, col. 7, lns. 38-50.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 15
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 15 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 1, lns. 5-17.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 15 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 5, lns. 26-30, col. 6, lns. 23-27, col. 3, lns. 59-61.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 15 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., col. 5, lns. 53-54, col. 6, lns. 27-29.

The '882 Patent	Reference No. 16
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency	Reference N . 16 discloses providing an electrode terminal and a return electrod electrically coupled

v ltage source;	t a high frequency voltage source, see, e.g., pp. 845-46.
positioning the electrode terminal in close proximity to the target site in the presence f an electrically conducting fluid; and	Reference No. 16 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 848.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 17
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 17 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 6, lns. 1-30.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 17 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g, col. 5, lns. 25-33.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 18
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 18 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 1, lns. 12-37.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 18 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g, col. 3 ln. 67 - col. 4 ln. 3.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 19
28. A method f r applying energy to a target site on	

a patient body structure comprising:	
providing an electrode terminal and a return electrode lectrically coupled to a high frequency voltage source;	Reference No. 19 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, lns. 33-46.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 19 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 1, lns. 34-38.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 20
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 20 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2 lns. 35-58.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 20 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 2 lns. 35-58.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 21
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 21 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 333.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 21 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 334.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 21 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, se , e.g., p. 337.

The '882 Patent	Reference No. 22
28. A method f r applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 22 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, lns. 21-58.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 22 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 2, lns. 21-58.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 23
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 23 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, lns. 42-68, col. 3 lns. 34-38.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 23 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 7, lns. 42-68, col. 3 ln. 66.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 24
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 24 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 1425.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 24 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 1425.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue	

necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 25
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 25 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 99.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 25 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 100.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 25 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., p. 101.

The '882 Patent	Reference No. 26
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 26 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 1383.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 26 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 1383.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 26 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., p. 1383.

The '882 Patent	Reference No. 27
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 27 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, lns. 38-66.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 27 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 3, lns. 48-53.
applying a high frequency v ltage between the	

electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 28
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 28 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, lns. 23-33.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 28 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 5, lns. 28-31.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 29
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 29 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., pp. 67-68.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 29 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., pp. 68, 71.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 29 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., pp. 68-70.

The '882 Patent	Reference No. 30
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 30 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 4, ln. 32 - col. 5 ln. 10.
positioning the electrode terminal in close proximity	Reference No. 30 discloses positioning th electrode

to the target site in the presence of an electrically conducting fluid; and	terminal in close proximity to th target site in the presence f an electrically conducting fluid, see, e.g., col. 4 lns. 48-58, Fig. 5.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 31
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 31 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, lns. 45-58.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 31 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 3, lns. 11-31; col. 7, ln. 65.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 33
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 33 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, lns. 45-69.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 31 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 2 lns. 45-69.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 34
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency	Reference No. 34 discloses providing an electrode terminal and a return electrode electrically coupled

voltage source;	t a high frequency voltage source, see, e.g., p. 42.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 34 discloses positioning the lectrode terminal in close proximity to the target site in the presence f an electrically conducting fluid, see, e.g., p. 43.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 35
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 35 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 248.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 35 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 248.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 36
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 36 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 4, lns. 4-39.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 36 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 7 lns. 30-37.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 37
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return	Reference No. 37 discloses providing an electrode

electrode electrically coupled t a high frequency voltage source;	terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., pp. 662-63.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 37 discl ses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 663.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 38
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 38 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 1168.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 38 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 1168.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 39
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 39 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 5, lns. 1-47.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 40
28. A method for applying energy to a target site on	

a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 40 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, lns. 62-65.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 40 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 2 lns. 37-42.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	
37. The method of claims 1 and 28 wherein	

The '882 Patent	Reference No. 41
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 41 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 291.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 41 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 291.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 41 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., p. 293.

The '882 Patent	Reference No. 42
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 42 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 275.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 42 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., pp. 275-76.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 42 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface f the body structure underlying the ablated body structure, see, e.g., p. 276.

The '882 Patent	Reference N . 43
28. A method for applying energy to a target sit on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 43 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., pp. 2-4.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 43 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., p. 11.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 44
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 44 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2 lns. 26-51.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 44 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 4, ln. 18.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 44 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., col. 1, lns. 66-68.

The '882 Patent	Reference No. 45
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 45 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 4, ln. 21 - col. 5 ln. 6.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 45 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 3, lns. 48-55, col. 5 lns. 6-19.
applying a high frequency voltage between the lectrode terminal and the return electrode, the high frequency voltage being sufficient to impart	Reference No. 45 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage

sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis bel w the surface of the body structure underlying the ablated body structure.	being sufficient to impart sufficient energy into th target site to ablate the body structure with ut causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., col. 3, lns. 64-68.

The '882 Patent	Reference No. 46
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 46 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, ln. 31-53.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 46 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 4 ln. 1, col. 6 ln. 42.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 47
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 47 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 1, ln. 34.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 47 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 6 lns. 4-60.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 48
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 48 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, ln. 28.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 48 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see,

	e.g., col. 5, ln. 39, col. 7 ln. 59.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 49
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 49 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 1 ln. 55.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 49 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 1 ln. 65.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 50
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 50 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2 lns. 21-63.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 50 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 2 lns. 2-20.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 51
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 51 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, ln. 41 - col. 3 ln. 58.

positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 51 discloses positioning the electrode terminal in cl se proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 3, lns. 50-53.
applying a high frequency v ltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 52
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 52 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 3, ln. 1-32.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 52 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 1, ln. 38.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 53
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 53 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, ln. 28-55.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 53 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 2 ln. 1 - col. 3 ln. 63, col. 6 ln. 28.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 54
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an lectrode terminal and a return	Reference No. 54 discloses providing an electrode

electrode electrically coupled to a high frequency v ltage source;	terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 670.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 54 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., pp. 669, 672.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 55
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 55 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, ln. 7-46.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 55 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 1, ln. 52-55, col. 2 lns. 7-46.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 56
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 56 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 1, ln. 61 - co. 2 ln. 12.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 56 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 4, lns. 20-50.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 57
28. A method f r applying energy to a target site on	

a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 57 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., p. 3.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 57 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., pp. 4, 6.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 57 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., p. 7.

The '882 Patent	Reference No. 58
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 58 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 3 lns. 9-49.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 59
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 59 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., pp. 2-3.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference N . 60

28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 60 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 4, ln. 45.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 60 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 5, ln. 40.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 61
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 61 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 3, ln. 30.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 61 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 4, ln. 15.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	Reference No. 57 discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure, see, e.g., col. 12 ln. 35.

The '882 Patent	Reference No. 62
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 62 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, ln. 35.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 62 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 4, lns. 10-29.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure	

underlying the ablated body structure.	

The '882 Patent	Reference No. 63
28. A method f r applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 63 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 2, lns. 11-26.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 64
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 64 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, ln. 5.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 65
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 65 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 5, ln. 34.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 65 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 2 ln. 10, col. 6 ln. 65, col. 8, ln. 22.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue	Reference No. 57 inherently discloses applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure

necrosis below the surface f the body structure underlying the ablated body structure.	without causing substantial tissue necrosis below the surface of th body structure underlying the ablated body structure.

The '882 Patent	Reference No. 66
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 66 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, ln. 1.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 66 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 2 ln. 10, col. 5, ln. 15.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 67
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 67 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, ln. 35.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 67 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 2 ln. 35, col. 4 ln. 10.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 68
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 68 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 3, ln. 25.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 66 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 1 lns. 21-44.
applying a high frequency voltage between the	

electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 69
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 69 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 3, ln. 20.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 69 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 4 lns. 13-17.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 70
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 70 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, ln. 38.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 70 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 3 ln. 1, col. 2 ln. 45.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 71
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 71 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., 3 ln. 43 - col. 4 ln. 18.
positioning the electrode terminal in close proximity t the target site in the presence of an electrically	Reference No. 71 discloses positioning the electrode terminal in close proximity to th target site in the

conducting fluid; and	presence of an electrically conducting fluid, see, e.g., col. 7 lns. 13-15.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 72
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 72 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 2, ln. 30.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 72 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 4, ln. 33, col. 3 ln. 9.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

The '882 Patent	Reference No. 73
28. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	Reference No. 73 discloses providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source, see, e.g., col. 4, ln. 35.
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	Reference No. 73 discloses positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid, see, e.g., col. 6 lns. 45-55.
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	

EXHIBIT C

The '592 Patent	Reference No. 1
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 1 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2, lns. 1-17.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 1 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 1, lns. 15-27.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 1 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2, lns. 1-17.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 1 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 1, lns. 15-27.

The '592 Patent	Reference N . 2
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 2 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., pp. 206, 211.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 2 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 207.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 2 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 211.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 2 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 207.

The '592 Patent	Reference No. 3
1. A method for applying electrical energy t a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 3 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 9, lns. 9-25.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 3 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 3, ln. 48 - col. 4, ln. 14.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 3 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 9, lns. 9-25.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 3 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 3, ln. 48 - col. 4 ln. 14.

The '592 Patent	Referenc No. 4
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 4 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 1, lns. 38-44; col. 1, lns. 11-15.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 4 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col 1, ln. 50-col. 2, ln. 2.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 4 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 1, lns. 38-44; col. 1 lns. 11-15.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 4 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 1, ln. 50-col. 2, ln. 2.

The '592 Patent	Reference No. 5
1. A method for applying electrical energy to a target site on a body structure on r within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 5 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 58.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 5 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., pp. 58-60.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 5 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 58.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 5 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., pp. 58-60.

The '592 Patent	Reference N . 6
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 6 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 3, lns. 3-7.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 6 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 3, lns. 3-7.

The '592 Patent	Reference No. 7
1. A method for applying electrical energy to a target site on a body structure n or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 7 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 3, lns. 33-44.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 7 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 44-66.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 7 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 3, lns.33-34.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 7 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 44-66.

The '592 Patent	Reference No. 8
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 8 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., pp. 5 and 1.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 8 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., p. 1.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 8 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 1.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 8 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., pp 5 and 1.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 8 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., p. 1.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 8 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 1.

The '592 Patent	Reference No. 9
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 9 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2 lns. 40-63.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 9 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 33-52.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 9 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2 lns. 40-63.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 9 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 33-52.

The '592 Patent	Reference N . 10
1. A method for applying lectrical energy t a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 10 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 7, lns. 2-5.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 10 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 4, lns. 18-28.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 10 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 7, lns. 2-5.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 10 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 4, lns. 18-28.

The '592 Patent	Reference No. 11
1. A method for applying electrical energy t a target site n a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 11 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 2.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 11 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 2.

The '592 Patent	Reference N . 12
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 12 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 528.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 12 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 528.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 12 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 528.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 12 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 528.

The '592 Patent	Reference No. 13
1. A method for applying electrical energy t a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 13 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 4, ln. 15; col. 7, lns. 38-50.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 13 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 4, ln. 15; col. 7, lns. 38-50.

The '592 Patent	Refer nce N . 15
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 15 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 3, lns. 59-61; col. 5 lons. 26-30; col. 6, lns. 23-27.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 15 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., col. 3, lns. 5-20.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 15 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 1, lns. 5-17.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 15 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 3, lns. 59-61; col. 5 lons. 26-30; col. 6, lns. 23-27.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 15 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., col. 3, lns. 5-20.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 15 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 1, lns. 5-17.

The '592 Patent	Reference No. 16
1. A method for applying electrical energy to a target site on a body structure n r within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 16 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 847
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 16 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the pp. 845-46.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 16 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 847.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 16 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., pp. 845-46.

The '592 Patent	Reference N . 17
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 17 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 5, lns. 25-33.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 17 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 6, lns. 1-30.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 17 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 5, lns. 25-33.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 17 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 6, lns. 1-30.

The '592 Patent	Reference No. 18
1. A method for applying electrical energy to a target site on a body structur on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 18 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 3 ln. 67 - col. 4 ln. 3.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 18 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 1, lns. 12-37.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 18 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 3 ln. 67 - col. 4 ln. 3.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 18 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 1, lns. 12-37.

The '592 Patent	Reference No. 19
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 19 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 1, lns. 34-38.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 19 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 33-46.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 19 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 1, lns. 34-38.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 19 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 33-46.

The '592 Patent	Reference No. 20
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 20 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2, lns. 35-58.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 20 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 35-58.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 20 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2, lns. 35-58.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 20 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 35-58.

The '592 Patent	Reference No. 21
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 21 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., pp. 332, 334.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 21 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 333.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 21 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 334.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 21 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 333.

The '592 Patent	Reference No. 22
1. A method for applying electrical energy to a target site on a body structure on r within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 22 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2, lns. 21-58.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 22 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 21-58.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 22 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 21-58.

The '592 Patent	Reference N . 23
1. A method for applying lectrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 23 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2, lns. 42-68; col. 3 ln. 66.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 23 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., col. 2, lns. 42-68.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 23 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 42-68; col. 3 lns. 34-38.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 23 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2, lns. 42-68; col. 3 ln. 66.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 23 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., col. 2, lns. 42-68.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 23 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 42-68; col. 3 lns. 34-38.

The '592 Patent	Reference No. 24
1. A method for applying electrical energy to a target site on a body structure n or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 24 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 1425.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 24 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 1425.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 24 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 1425.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 24 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., _____________.

The '592 Patent	Reference N . 25
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 25 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 100.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 25 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 99.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 25 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 100.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 25 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 99.

The '592 Patent	Reference No. 26
1. A method for applying electrical energy t a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 26 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 1383.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 26 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., 1383.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 26 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., 1383.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 26 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 1383.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 26 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., p. 1383.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 26 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 1383.

The '592 Patent	Reference No. 27
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 27 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 1, ln. 18; col. 3, lns. 48-53.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 27 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 38-66.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 27 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 1, ln. 18; col. 3, lns. 48-53.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 27 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 38-66.

The '592 Patent	Reference No. 28
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 28 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g.,col. 5, lns. 28-31.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 28 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 23-33.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 28 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 5, lns. 28-31.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 28 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 23-33.

The '592 Patent	Reference No. 29
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 29 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., pp. 68 and 71.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 29 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., pp. 67-68.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 29 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 68.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 29 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., pp. 67-68.

The '592 Patent	Reference No. 30
1. A method f r applying electrical energy to a target site n a body structure n or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 30 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 4 lns. 48-58.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 30 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., Fig. 5.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 30 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 4, ln. 32 - col. 5 ln. 10.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 30 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 4 lns. 48-58, Fig. 5.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 30 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., Fig. 5.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 30 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col 4, lns. 32 - col. 5 ln. 10.

The '592 Patent	Reference No. 31
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 31 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 3, lns. 11-31; col. 7, ln. 65.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 31 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., Fig. 5.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 31 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 45-58.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 31 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 3, lns. 11- 31, col. 7, ln. 65.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 31 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., Fig. 5.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 31 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 45-58.

The '592 Patent	Reference N . 33
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 33 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2 lns. 45-69.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 33 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., Fig. 2.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 33 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 45-69.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 33 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2 lns. 45-69.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 33 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., Fig. 2.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 33 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 45-69.

The '592 Patent	Reference No. 34
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 34 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 43.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 34 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., p. 44.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 34 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., 42.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 34 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 43.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 34 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., p. 44.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 34 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 42.

The '592 Patent	Reference No. 35
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 35 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 248.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 35 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 248.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 35 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 248.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 35 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 248.

The '592 Patent	Reference No. 36
1. A method for applying electrical nergy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 36 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 7, lns. 30-32.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 36 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 4, lns. 4-39.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 36 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 7, lns. 30-37.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 36 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 4, lns. 4-39.

The '592 Patent	Reference No. 37
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 37 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 663.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 37 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., pp. 662-63.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 37 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 663.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 37 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., pp. 662-63.

The '592 Patent	Reference No. 38
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 38 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 1168.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 38 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 1168.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 38 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 1168.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 38 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., 1168.

The '592 Patent	Reference No. 39
1. A method for applying electrical energy to a target site on a body structure on r within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 39 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 5 lns. 1-47.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 39 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 5 lns. 1-47.

The '592 Patent	Reference No. 40
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 40 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2 lns. 37-42.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 40 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 62-65.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 40 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2 lns. 37-42..
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 40 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 62-65.

The '592 Patent	Reference No. 41
1. A method for applying electrical energy to a target site on a body structure on r within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 41 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 291.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 41 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 291.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 41 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 291.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 41 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 291.

The '592 Patent	Reference No. 42
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 42 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 275.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 42 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 275.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 42 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., pp. 275-76.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 42 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 275.

The '592 Patent	Reference No. 43
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 43 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 11.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 43 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., pp. 2-4.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 43 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 11.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 43 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., pp. 2-4.

The '592 Patent	Reference No. 44
1. A method for applying electrical energy t a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 44 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 4, ln. 18.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 44 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, lns. 26-51.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 44 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 4, ln. 28.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 44 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, lns. 26-51.

The '592 Patent	Reference No. 45
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 45 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 3, lns. 48-55, col. 5 lns. 6-19.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 45 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 4, ln. 21 - col. 5 ln. 6.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 45 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 3, lns. 48-55.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 45 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 4, ln. 21 - col. 5 ln. 6.

The '592 Patent	Reference No. 46
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 46 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 4, ln. 1; col. 6, lns. 42.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 46 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., col. 6, ln. 42.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 46 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, ln. 31-53.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 46 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 4, ln. 1; col. 6, ln. 42.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 46 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., col. 6, ln. 42.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 46 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, ln. 31-53.

The '592 Patent	Reference No. 47
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 47 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 6 lns. 4-60.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 47 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 1, ln. 34.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 47 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 6 lns. 4-60.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 47 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 1, ln. 34.

The '592 Patent	Reference N . 48
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 48 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 5, ln. 39.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 48 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., col. 6, ln. 28.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 48 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, ln. 28.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 48 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 5, ln. 39; col. 7, ln. 59.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 48 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., col. 6, ln. 28.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 48 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, ln. 28.

The '592 Patent	Ref rence N . 49
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 49 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 1 ln. 65.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 49 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 1, ln. 55.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 49 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 1 ln. 65.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 49 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 1, ln. 55.

The '592 Patent	Reference No. 50
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 50 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2 lns. 2-20.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 50 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2 lns. 21-63.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 50 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2 lns. 2-20..
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 50 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2 lns. 21-63.

The '592 Patent	Reference No. 51
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 51 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 3, lns. 50-53.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 51 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., col. 3, ln. 53.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 51 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, ln. 41 - col. 3 ln. 58.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 51 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 3, lns. 50-53.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 51 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., col. 3, ln. 53.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 51 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, ln. 41- col. 3 ln. 58.

The '592 Patent	Reference No. 52
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 52 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 1, ln. 38.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 52 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 3, ln. 1-32.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 52 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 1, ln. 38.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 52 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 3, ln. 1-32.

The '592 Patent	Reference No. 53
1. A method for applying electrical energy t a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 53 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2, ln. 1; col. 3, ln. 63; col. 6, ln. 28.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 53 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, ln. 28-55.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 53 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2, ln. 1; col. 3, ln. 63; col. 6, ln. 28.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 53 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, ln. 28-55.

The '592 Patent	Reference No. 54
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 54 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., pp. 669, 672.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 54 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 670.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 54 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 672
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 54 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 670.

The '592 Patent	Reference No. 55
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 55 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 1 lns. 52-55, col. 2 lns. 7-46.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 55 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, ln. 7-46.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 55 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 1 lns. 52-55, col. 2 lns. 7-46.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 55 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, ln. 7-46.

The '592 Patent	Reference No. 56
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 56 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 4 lns. 20-50.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 56 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 1, ln. 61 - col. 2 ln. 12.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 56 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 4, lns. 20-50.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 56 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 1, ln. 61 - col. 2 ln. 12.

The '592 Patent	Reference No. 57
1. A method f r applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 57 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., pp. 4, 6.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 57 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., p. 3.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 57 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., p. 6.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 57 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., p. 3.

The '592 Patent	Reference N . 58
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 58 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 3 lns. 9-49.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 58 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 3 lns. 9-49.

The '592 Patent	Reference No. 59
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 59 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., pp. 2-3.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	

The '592 Patent	Reference N . 60
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 60 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., p. 540.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 60 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 4, ln. 45.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 60 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 5, ln. 40.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 60 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 4, ln. 45.

The '592 Patent	Reference No. 61
1. A method for applying electrical energy t a target site n a body structure n or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 61 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 3, ln. 30.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 61 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 4, ln. 15.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 61 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 3, ln. 30.

The '592 Patent	Reference No. 62
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 62 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., Fig. 3.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 62 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, ln. 35.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 62 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., Fig. 3.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 62 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, ln. 35.

The '592 Patent	Reference No. 63
1. A method for applying electrical energy to a target site n a body structure n or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 63 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2, ln. 11, 26.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 63 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2, ln. 11, 26.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	

The '592 Patent	Reference No. 64
1. A method for applying lectrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 64 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, ln. 5.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 64 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, ln. 5.

The '592 Patent	Referenc No. 65
1. A method for applying electrical energy t a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 65 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2 ln. 10; col. 6, ln. 65; col. 8, ln. 22.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 65 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 5, ln. 34.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 65 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2 ln. 10; col. 6, ln. 65; col. 8, ln. 22.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 65 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 5, ln. 34.

The '592 Patent	Reference No. 66
1. A method f r applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 66 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 2, ln. 10, col. 5, ln. 15.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 66 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, ln. 1.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 66 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2 ln. 10.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 66 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, ln. 1.

The '592 Patent	Reference No. 67
1. A method f r applying electrical energy to a target site on a body structure n r within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 67 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 4, ln. 10, col. 2 ln. 35.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 67 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, 35.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 67 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2, ln. 35, col. 4 ln. 10.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 67 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, ln. 35.

The '592 Patent	Reference No. 68
1. A method for applying electrical nergy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 67 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 1 lns. 21-44.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 68 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 3, ln. 25.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 68 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 3, ln. 25.

The '592 Patent	Reference No. 69
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 69 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 4, ln. 13-17.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 69 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 3, ln. 20.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 69 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 3, ln. 20.

The '592 Patent	Reference N . 70
1. A method for applying lectrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 70 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 3 ln. 1, col. 2 ln. 45.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 70 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, ln. 38.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 70 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 2, ln. 45, col. 3 ln. 1.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 70 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, ln. 38.

The '592 Patent	Reference No. 71
1. A method for applying lectrical energy to a target site on a body structure on r within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 71 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 3 ln. 43 - col. 4 ln. 18.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 71 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 7, lns. 13-15.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 71 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 3 ln. 43 - col. 4 ln. 18.

The '592 Patent	Reference No. 72
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	Reference No. 72 discloses positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid, see, e.g., col. 4, ln. 33.
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Reference No. 72 discloses positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode, see, e.g., col. 2 lns. 29-36.
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	Reference No. 72 discloses applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path, see, e.g., col. 2, ln. 30.
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:	
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	Reference No. 72 discloses contacting an active electrode with the body structure in the presence of an electrically conductive fluid, see, e.g., col. 3, ln. 9; col. 4, ln. 33.
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Reference No. 62 discloses spacing a return electrode away from the body structure in the presence of the electrically conductive fluid, see, e.g., col. 2 lns. 29-36.
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	Reference No. 72 discloses applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode, see, e.g., col. 2, ln. 30.

FISH & RICHARDSON P.C.

500 Arguello Street
Suite 500
Redwood City, California
94063-1526

Telephone
650 839-5070

Facsimile
650 839-5071

Web Site
www.fr.com

BY FAX AND MAIL

September 10, 2002

Perry Clark, Esquire
Weil, Gotshal & Manges LLP
201 Redwood Shores Parkway
Redwood Shores, CA 94065

Re: Arthrocare Suit - Delaware
USDC-D. Del. - C.A. No. 01-504-SLR

Dear Perry:

I have enclosed a revised set of invalidity claim charts that correct some errors we found in the charts served on ArthroCare on September 6, 2002, and a chart -- Exhibit E -- that was inadvertently not included previously.

Very truly yours,

Kurtis MacFerrin

cc: Jack B. Blumenfeld, Esq., Morris, Nichols, Arsht & Tunnell

50107269.doc

Exhibit A:
Prior art references upon which Smith & Nephew presently intends to primarily rely.

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
8	00/00/76	Acta Medicotechnica (Medizinal-Markt), Vol. 24, No. 4, 1976 129 – 134	E. Elsasser and E. Roos	Uber ein Instrument zur leckstromfreien transurethralen Resection (Concerning An Instrument for Transurethral resection without leakage of current)
10	07/20/76	US 3,970,088	Charles F. Morrison	Electrosurgical Devices Having Sesquipolar Electrode Structures Incorporated Therein
15	09/26/78	US 4,116,198 and its file history	Eberhard Roos	Electro-Surgical Device
22	04/27/82	US 4,326,529	James D. Doss and Richard L. Hutson	Corneal-Shaping Electrode
23	04/26/83	US 4,381,007	James D. Doss	Multipolar Corneal-Shaping Electrode with Flexible Removable Skirt
26	06/00/85	JACC Vol. 5, No. 6, 1382-6	Cornelis J. Slager, MSc, Catharina E. Essed, MD, Johan C.H. Schuurbiers, BSc, Nicolaas Bom, Ph.D, Patrick W. Serruys, MD, Geert T. Meester, MD, FACC	Vaporization of Atherosclerotic Plaques by Spark Erosion
29	00/00/87	Kardiologie, Kardiol.76: Supp. 6, 67-71 (1987)	C.J. Slager, A.C. Phaff, C.E. Essed, J.C.H. Schuurbiers, N. Bom, V.A. Vandenbroucke, and P.W. Serruys	Spark Erosion of Arteriosclerotic Plaques
31	06/23/87	US 4,674,499	David S.C. Pao	Coaxial Bipolar Probe
32	07/00/88	Valleylab Part Number 945 100 102 A	Valleylab, Inc.	Surgistat Service Manual

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
34	00/00/89	SPIE Vol. 1068 Catheter-based Sensing and Imaging Technology	Paul C. Nardella	Radio Frequency Energy and Impedance Feedback
36	02/21/89	US 4,805,616	David S.C. Pao	Bipolar Probes for Ophthalmic Surgery and Methods of Performing Anterior Capsulotomy
38	04/00/89	JACC Vol. 13 No. 5, 1167-75	Benjamin I. Lee, MD, FACC, Gary J. Becker, MD, Bruce F. Waller, MD, FACC, Kevin J. Barry, MS, Raymond J. Connolly, Ph.D, Jonathan Kaplan, MD, Alan R. Shapiro, MS, Paul C. Nardella, BS	Thermal Compression and Molding of Atherosclerotic Vascular Tissue With Use of Radiofrequency Energy: Implications for Radiofrequency Balloon Angioplasty
48	12/11/90	US 4,976,711	David J. Parins, Mark A. Rydell, Peter Stasz	Ablation Catheter With Selectively Deployable Electrodes
51	04/16/91	US 5,007,908	Mark A. Rydell	Electrosurgical Instrument Having Needle Cutting Electrode And Spot-Coag Electrode
52	04/23/91	US 5,009,656	Harry G. Reimels	Bipolar Electrosurgical Instrument

Exhibit B:

Examples of where each limitation of the dependent claims of the '536 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6	7
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.	4:9-24						Fig. 2
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,							3:58-61
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.							
55. The electrosurgical system of claim 45 wherein							
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	1:40-55	206	8:10:9:8	3:10-28	58	2:54-57	2:67-3:16
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.						1:45-50	
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.		206-07	3:49-4:14		58		
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).		211			58		

Exhibit B:

Examples of where each limitation of the dependent claims of the '536 patent may be found in each reference.

claim text \ reference	8	9	10	11	12	13	14
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.	7		4:31-43	2			
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,			5:50-57	3			
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.	1						
55. The electrosurgical system of claim 45 wherein							
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	7	7:58-68	4:44-64	3	530	6:45-54	
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	11	0.0479167		2	527		
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.		1:34-53					
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).		1:34-53					7:26-42

Exhibit B:

Examples of where each limitation of the dependent claims of the '536 patent may be found in each reference.

claim text \ reference	15	16	17	18	19	20	21
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.	5:3-10				2:34-46	2:35-58	
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,					2:34-46	2:35-58	
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.	3:5-20						
55. The electrosurgical system of claim 45 wherein							
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	4:66-5:2	845	3:1-52	1:15-36	2:34-46	2:35-58	333
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	1:18-27	845		2:21-63			334
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.				8:30-39	6:61-68	2:35-58	333
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).				8:30-39	5:46-6:7	2:35-58	333

Exhibit B:

Examples of where each limitation of the dependent claims of the '536 patent may be found in each reference.

claim text \ reference	22	23	24	25	26	27	28
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.		Fig. 1				3:30-47	
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,		Fig. 1-2				3:30-47	
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.		2:42-68			1383		
55. The electrosurgical system of claim 45 wherein							
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	2:41-43	Fig. 9; 3:29-30	1425	100	1383	1:26-50	1:57-2:6
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.			1426	100	1383	1:26-50	
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.	3:46-51	3:30-38	1425		1383		7:62-8:14
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).	3:46-51	3:30-38	1425		1383		

Exhibit B:

Examples of where each limitation of the dependent claims of the '536 patent may be found in each reference.

claim text \ reference	29	30	31	32	33	34	35
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.	69		4:55-5:16				
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,	69		4:55-5:16				
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.		Fig. 5	Fig. 4		Fig. 2	44	
55. The electrosurgical system of claim 45 wherein							
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	68	5:11-27	5:17-31				
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	68		9:37-47			42	
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.	68				2:45-3:16	42	
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).	68			8	2:45-3:16		

Exhibit B:

Examples of where each limitation of the dependent claims of the '536 patent may be found in each reference.

claim text \ reference	36	37	38	39	40	41	42
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.				Fig. 5; 8:9-34	4:16-28	292	275
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,	4:4-39			Fig. 5; 8:9-34	4:36-43	292	275
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.							
55. The electrosurgical system of claim 45 wherein							
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	4:40-58	662	1168	Fig. 5; 8:9-34	4:16-35	292	275
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	2:16-34		1168	3:63-4:16	5:62-6:19	291	275
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.			1168		2:62-65		
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).							

Exhibit B:

Examples of where each limitation of the dependent claims of the '536 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48	49
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.				3:41-4:2	1:57-2:35	4:18-28	
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,				3:41-4:2	1:57-2:35	4:18-28	
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.			inherent	6:42		6:28	
55. The electrosurgical system of claim 45 wherein							
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	2:8-18	3:48-51	5:7-19	3:41-4:2	1:57-2:35	3:65-4:17	3:27-44
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	1:1-4	3:6-25		3:8-34	1:18-39		1:47-68
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.		3:36-41		6:5-30			
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).							

Exhibit B:
Examples of where each limitation of the dependent claims
of the '536 patent may be found in each reference.

claim text \ reference	50	51	52	53	54	55	56
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.	3:17-23	3:35-57	2:63-3:5	3:37-64		2:62-68	1:61-2:11
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,	3:17-23	3:35-57	1:42-50	3:37-64		2:62-68	
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.		3:53					
55. The electrosurgical system of claim 45 wherein							
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	1:40-51	3:35-57	1:42-50	3:37-64	670		1:61-2:11
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	2:2-20	1:9-12	1:5-9	1:9-15	669	1:52-55	1:50-58
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.					669		
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).					672		

Exhibit B:

Examples of where each limitation of the dependent claims of the '536 patent may be found in each reference.

claim text \ reference	57	58	59	60	61	62	63
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.		4:27-33		3:52-66		3:12-27	
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,				3:52-66		3:12-27	
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.						Fig. 3	
55. The electrosurgical system of claim 45 wherein							
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.				4:15-29	5:10-28	3:28-60	
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	4:20-5:5	3:30-49	1:5-12			3:21-32	15:62-16:7
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.					4:28-48		
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).					4:28-48		3:21-32

Exhibit B:

Examples of where each limitation of the dependent claims of the '536 patent may be found in each reference.

claim text \ reference	64	65	66	67	68	69	70
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.				4:37-52	4:33-43		2:37-46
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,				4:37-52	4:33-43		2:58-66
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.							
55. The electrosurgical system of claim 45 wherein							
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	5:44-63	5:20-36	1:63-2:17	4:37-52	4:33-43	3:13-16	2:37-46
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.				1:10-15			
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.		6:25-40					
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).							

Exhibit B:

Examples of where each limitation of the dependent claims of the '536 patent may be found in each reference.

claim text \ reference	71	72	73
46. An electrosurgical system as in claim 45, wherein			
the return electrode forms a portion of the shaft of the electrosurgical probe.			5:36-58
47. An electrosurgical system as in claim 46 further including			
an insulating member circumscribing the return electrode,	5:36-58		
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.		2:29-36	
55. The electrosurgical system of claim 45 wherein			
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	3:43-53	2:36-41	6:8-22
56. The electrosurgical system of claim 45 wherein			
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.		2:63-68	3:26-34
58. The electrosurgical system of claim 45 wherein			
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.			
59. The electrosurgical system of claim 45 wherein			
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).			6:23-33

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	1:15-27	207	3:48-4:14	1:5-2:2	58-60	3:3-7
a return electrode electrically coupled to a high frequency voltage source;	1:15-27	207	3:48-4:14	1:5-2:2	58-60	3:3-7
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and		211	9:9-25	1:38-44		
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent		58,61	
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.						
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.		211			58	
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		211			58	
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						3:22-40
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.			5:3-5			
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.			5:3-5			
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and			inherent		58,61	

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6
inducing the discharge of photons to the target site in contact with the vapor layer.						
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.			2:36-3:25			
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.		211			58	
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		211			58	
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.			8:10-9:8	3:10-28		
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	7	8	9	10	11	12
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:44-66	1	2:33-52	4:18-28	2	528
a return electrode electrically coupled to a high frequency voltage source;	2:44-66	1	2:33-52	4:18-28	2	528
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and		5	2:40-63			528
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1,6		6:54-7:5		
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.				5:58-66		
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.			1:34-53			
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.			1:34-53			
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.	3:17-32				2:1-14	
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.		inherent				529
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.		inherent				529
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and		1,6		6:54-7:5		

Exhibit C:
Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	7	8	9	10	11	12
inducing the discharge of photons to the target site in contact with the vapor layer.				5:58-66		
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.					3	
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.			1:34-53			
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.			1:34-53			
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.			2:40-63			
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:
Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	13	14	15	16	17	18
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	4:15; 7:38-50		1:5-17	845-46	6:1-30	1:12-37
a return electrode electrically coupled to a high frequency voltage source;	4:15; 7:38-50		1:5-17	845-46	6:1-30	1:12-37
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and			5:26-30	848		3:67-4:3
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.	4:47		1:33-40			inherent
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.			3:31-33	845		
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.		7:26-42;Fig. 6				8:30-39
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		7:26-42;Fig.6				
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.						
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.						
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and	4:47		1:33-40			inherent

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	13	14	15	16	17	18
inducing the discharge of photons to the target site in contact with the vapor layer.			3:31-33	845		
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.	11:62-12:34					
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.		7:26-42; Fig. 6				8:30-39
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		7:26-42; Fig. 6				
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.						
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	19	20	21	22	23	24
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:33-46	2:35-58	333	2:21-58	2:42-68	1425
a return electrode electrically coupled to a high frequency voltage source;	2:33-46	2:35-58	333	2:21-58	2:42-68	1425
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	1:34-38	2:35-58	334	2:21-58	2:42-68; 3:66	1425
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.						
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.					3:30-38	
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.					3:30-38	
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.			334	2:47-51	3:65-68	1426
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.			334	2:47-51;Fig. 1	3:65-68	1426
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and						

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	19	20	21	22	23	24
inducing the discharge of photons to the target site in contact with the vapor layer.						
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.			333	5:31-33		1425
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.					3:30-38	
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.						
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:
Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	25	26	27	28	29	30
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	99	1383	2:38-66	2:23-33	67-68	4:32-5:10
a return electrode electrically coupled to a high frequency voltage source;	99	1383	2:38-66	2:23-33	67-68	4:32-5:10
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	100	1383	1:18; 3:48-53	5:28-31	68	4:48-58
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1382-83	inherent			inherent
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.		1382			68	5:11-27
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.		1383			68	
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		1383			68	
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.		1383				
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.	100	1383		1:57-2:6	68	
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.	100	1383		1:57-2:6	68	7:3-8:5
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and		1382-83	inherent			inherent

Exhibit C:
Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	25	26	27	28	29	30
inducing the discharge of photons to the target site in contact with the vapor layer.		1382			68	5:11-27
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.		1383			68	
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.		1383			68	
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		1383			68	
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.		1383-84			68	
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.						
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:
Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	31	32	33	34	35	36
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:45-58		2:45-69	42	248	4:4-39
a return electrode electrically coupled to a high frequency voltage source;	2:45-58		2:45-69	42	248	4:4-39
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	3:31; 7:65		2:45-69	43	248	7:30-32
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.						
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.		8				
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		8				
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.	2:45-67					6:34-37
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.	7:3-8:5		5:4-30		248	7:26-52
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.					248	7:26-52
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and						

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	31	32	33	34	35	36
inducing the discharge of photons to the target site in contact with the vapor layer.						
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.	6:14-37					5:5-20
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.		8				
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		8				
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.	2:45-3:10					
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:
Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	37	38	39	40	41	42
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	662-63	1168	5:1-47	2:62-65	291	275
a return electrode electrically coupled to a high frequency voltage source;	662-63	1168	5:1-47	2:62-65	291	275
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	663	1168		2:37-42	291	275
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1170				
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.			1:26-37			
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.	662	1168		5:62-6:19	291	275
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.	662	1168			291	275
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and		1170				

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	37	38	39	40	41	42
inducing the discharge of photons to the target site in contact with the vapor layer.			1:26-37			
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.		1168		5:59-61		
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.				5:43-53		
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:
Examples of where each limitation of the dependent claims
of the '882 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:8-4:10	2:26-51	4:21-5:6	2:31-53	1:34	2:28
a return electrode electrically coupled to a high frequency voltage source;	2:8-4:10	2:26-51	4:21-5:6	2:31-53	1:34	2:28
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	11		3:48-55	6:42	6:4-60	5:39
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	inherent		inherent
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.						
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.			3:48-4:7	6:39-45		5:65-6:19
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.			3:48-4:7			5:65-6:19
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and			inherent	inherent		inherent

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48
inducing the discharge of photons to the target site in contact with the vapor layer.						
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.						
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.	2:8-18		3:40-47	6:39-45		3:65-4:17
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:
Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	49	50	51	52	53	54
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	1:55	2:21-63	2:41-3:58	3:1-32	2:28-55	670
a return electrode electrically coupled to a high frequency voltage source;	1:55	2:21-63	2:41-3:58	3:1-32	2:28-55	670
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	1:65	2:2-20	3:53	1:38	3:63-2:1	672
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	4:10		
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.				4:3-18		670
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.						670
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.				1:53-61		
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.	3:45-68		3:35-57	2:24-29		
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.			3:35-57	2:24-29		
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and			inherent	4:10		

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	49	50	51	52	53	54
inducing the discharge of photons to the target site in contact with the vapor layer.				4:3-18		670
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.		3:40-50				
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.						670
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.	5:16-23					
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:
Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	55	56	57	58	59	60
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:7-46	1:61-2:12	3	3:9-49		4:45
a return electrode electrically coupled to a high frequency voltage source;	2:7-46	1:61-2:12	3	3:9-49		4:45
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	1:52-55		6			5:40
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.	3:15-31			1:42-53		
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.			6:7-15			
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.			6:7-15			
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and						

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	55	56	57	58	59	60
inducing the discharge of photons to the target site in contact with the vapor layer.	3:15-31			1:42-53		
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.						
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.						
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	61	62	63	64	65	66
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	3:30	2:35		2:5	5:34	2:1
a return electrode electrically coupled to a high frequency voltage source;	3:30	2:35		2:5	5:34	2:1
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	11:65-66	4:10-29			2:10; 6:65	2:10
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.					6:56	
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.	13:3-4	4:6-9	4:21-32		6:50-63	1:63-2:17
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.	4:28-48		3:21-32			
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.	4:28-48					
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.					6:64-7:10	3:24-33
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.					6:64-7:10	3:24-33
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and					6:56	

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	61	62	63	64	65	66
inducing the discharge of photons to the target site in contact with the vapor layer.	13:3-4	4:6-9	4:21-32		6:50-63	1:63-2:17
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.						
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.	4:28-48		3:21-32			
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.	4:28-48					
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.					5:55-61; 8:19-31	
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.		4:30-46				
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	67	68	69	70	71	72
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:35	3:25	3:20	2:38	3:43-4:18	2:30
a return electrode electrically coupled to a high frequency voltage source;	2:35	3:25	3:20	2:38	3:43-4:18	2:30
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	4:10			3:1		4:33
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.			1:22-34		7:17-37	
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.	4:4-11			2:67-3:8		
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.	4:4-11			2:67-3:8		
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and						

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	67	68	69	70	71	72
inducing the discharge of photons to the target site in contact with the vapor layer.			1:22-34		7:17-37	
47. The method of claims 23 or 48[1] wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.						2:42-54
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48[2] further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.	3:64-4:3	2:65-3:22		3:44-53		
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.						

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	73
1. A method for applying energy to a target site on a patient body structure comprising:	
providing an electrode terminal and	4:35
a return electrode electrically coupled to a high frequency voltage source;	4:35
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	6:45-55
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.	
13. The method of claim 1 wherein	
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.	2:22-34
17. The method of claim 1 wherein	
the high frequency voltage is at least 200 volts peak to peak.	6:23-33
18. The method of claim 1 wherein	
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.	
21. The method of claim 1 wherein	
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.	
23. The method of claim 1 wherein	
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.	
24. The method of claim 1 wherein	
the liquid phase of the electrically conductive fluid comprises isotonic saline.	
29. The method of claim 28 wherein the applying step comprises:	
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and	

Exhibit C:

Examples of where each limitation of the dependent claims of the '882 patent may be found in each reference.

claim text \ reference	73
inducing the discharge of photons to the target site in contact with the vapor layer.	2:22-34
47. The method of claims 23 or 48[1] wherein	
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.	
48. The method of claims 26 and 28 wherein	
the high frequency voltage is at least 200 volts peak to peak.	6:23-33
49. The method of claims 26 and 28 wherein	
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.	
50. The method of claims 26 and 28 wherein	
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.	
54. The method of claims 23 or 48[2] further comprising	
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.	
[1] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.	
[2] The Certificate of Correction dated May 2, 2000, refers to claim numbers 23 or 48; no certificate of correction has been requested, let alone issued, to correct this or any other claim to refer to claims 1 and 28, respectively, as ArthroCare suggests and assumes.	

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			5:3-5; 9:8-25			2:55-3:2
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.						
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.			5:3-5; 9:8-25			2:55-3:2
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	1:40-55	206	8:10-9:8	3:10-28	58	2:54-57
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.			5:3-5			
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.						
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent		58,61	
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		211			58	
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			5:3-5; 9:8-25			2:55-3:2

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.						
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.			5:3-5; 9:8-25			2:55-3:2
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	1:40-55	206	8:10-9:8	3:10-28	58	2:54-57
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.			5:3-5			
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.						
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent		58,61	
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		211			58	

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	7	8	9	10	11	12
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and		11	2:40-63			529
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.		1, 11				
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.		11	2:40-63			529
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	2:67-3:16	7	7:58-68	4:44-64	3	530
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.		inherent				529
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.		1, 11				
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1,6		6:54-7:5		
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.			1:34-53			
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and		11	2:40-63			529

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	7	8	9	10	11	12
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.		1, 11				
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.		11	2:40-63			529
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	2:67-3:16	7	7:58-68	4:44-64	3	530
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.		inherent				529
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.		1, 11				
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.		1,6		6:54-7:5		
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.			1:34-53			

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	13	14	15	16	17	18
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			7:45-62			1:65-2:21
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.			3:5-20; 5:21-30			
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.			7:45-62			1:65-2:21
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	6:45-54		4:66-5:2	845	3:1-52	1:15-36
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.						
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode			3:5-20; 5:21-30			
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.	4:47		1:33-40			inherent
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		7:26-42; Fig. 6				
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			7:45-62			1:65-2:21

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	13	14	15	16	17	18
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.			3:5-20; 5:21-30			
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.			7:45-62			1:65-2:21
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	6:45-54		4:66-5:2	845	3:1-52	1:15-36
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.						
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.			3:5-20; 5:21-30			
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.	4:47		1:33-40			inherent
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		7:26-42; Fig. 6				

Exhibit D:
Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	19	20	21	22	23	24
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	3:1-16	2:59-3:5	334	2:25-31	2:51-55	1425
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.				2:25-31	2:42-68; 3:65-4:7	1426
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.			334	2:25-31; Figs. 1-2	2:51-55	1425
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	2:34-46	2:35-58	333	2:41-43	Fig. 9; 3:29-30	1425
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.			334	2:47-51; Fig. 1	3:65-68	1426
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.				2:25-31	2:42-68; 3:65-4:7	1426
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.					3:30-38	
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	3:1-16	2:59-3:5	334	2:25-31	2:51-55	1425

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	19	20	21	22	23	24
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.				2:25-31	2:42-68; 3:65-4:7	1426
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.			334	2:25-31; Figs. 1-2	2:51-55	1425
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	2:34-46	2:35-58	333	2:41-43	Fig. 9; 3:29-30	1425
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.			334	2:47-51; Fig. 1	3:65-68	1426
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.				2:25-31	2:42-68; 3:65-4:7	1426
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.						
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.					3:30-38	

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	25	26	27	28	29	30
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	100	1383		5:12-35	68	
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.	100	1383		1:57-2:6	68	Fig. 5
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	100	1383			68	
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	100	1383	1:26-50	1:57-2:6	68	5:11-27
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.	100	1383		1:57-2:6	68	
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.	100	1383		1:57-2:6	68	Fig. 5
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1382-83	inherent			inherent
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		1383			68	
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	100	1383		5:12-35	68	

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	25	26	27	28	29	30
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.	100	1383		1:57-2:6	68	Fig. 5
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	100	1383			68	
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	100	1383	1:26-50	1:57-2:6	68	5:11-27
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.	100	1383		1:57-2:6	68	
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.	100	1383		1:57-2:6	68	Fig. 5
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.		1382-83	inherent			inherent
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		1383			68	

Exhibit D:
Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	31	32	33	34	35	36
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	7:3-8:5		5:4-30		248	7:26-52
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.	Fig. 4		Fig. 2; 5:4-30	44		7:26-52
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	2:45-3:10				248	7:26-52
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	5:17-31					4:40-58
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.	7:3-8:5				248	7:26-52
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.	Fig. 4		Fig. 2; 5:4-30	44		7:26-52
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		8				
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	7:3-8:5		5:4-30		248	7:26-52

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	31	32	33	34	35	36
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.	Fig. 4		Fig. 2; 5:4-30	44		7:26-52
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	2:45-3:10				248	7:26-52
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	5:17-31					4:40-58
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.	7:3-8:5				248	7:26-52
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.	Fig. 4		Fig. 2; 5:4-30	44		7:26-52
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.						
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		8				

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	37	38	39	40	41	42
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	662	1168	1:64-2:17	5:62-6:19	291	275
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.	662					
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	662	1168	1:64-2:17		291	275
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	662	1168	Fig. 5; 8:9-34	4:16-35	292	275
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.	662	1168			291	275
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.	662					
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1170				
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	662	1168	1:64-2:17	5:62-6:19	291	275

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	37	38	39	40	41	42
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.	662					
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	662	1168	1:64-2:17		291	275
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	662	1168	Fig. 5; 8:9-34	4:16-35	292	275
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.	662	1168			291	275
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.	662					
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.		1170				
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						

Exhibit D:
Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	11:1-20		3:48-4:7	6:39-45		3:65-4:17
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.			inherent	6:42; 3:8-34		6:28; 5:65-6:19
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	11:1-20		3:48-4:7	6:39-45		3:65-4:17
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	2:8-18	3:48-51	5:7-19	3:41-4:2	1:57-2:35	3:65-4:17
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.			3:48-4:7			5:65-6:19
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.			inherent	6:42; 3:8-34		6:28; 5:65-6:19
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	inherent		inherent
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	11:1-20		3:48-4:7	6:39-45		3:65-4:17

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.			inherent	6:42; 3:8-34		6:28; 5:65-6:19
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	11:1-20		3:48-4:7	6:39-45		3:65-4:17
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	2:8-18	3:48-51	5:7-19	3:41-4:2	1:57-2:35	3:65-4:17
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.			3:48-4:7			5:65-6:19
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.			inherent	6:42; 3:8-34		6:28; 5:65-6:19
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	inherent		inherent
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	49	50	51	52	53	54
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	1:47-68		3:30-34	2:24-29	3:37-64	
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.	1:47-68		3:35-57	1:30-39	3:37-64	
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	1:47-68		3:30-34	2:24-29	3:37-64	
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	3:27-44	1:40-51	3:35-57	1:42-50	3:37-64	670
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.			3:35-57	2:24-29		
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.	1:47-68		3:35-57	1:30-39	3:37-64	
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	4:10		
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	1:47-68		3:30-34	2:24-29	3:37-64	

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	49	50	51	52	53	54
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.	1:47-68		3:35-57	1:30-39	3:37-64	
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	1:47-68		3:30-34	2:24-29	3:37-64	
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	3:27-44	1:40-51	3:35-57	1:42-50	3:37-64	670
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.			3:35-57	2:24-29		
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.	1:47-68		3:35-57	1:30-39	3:37-64	
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	4:10		
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	55	56	57	58	59	60
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			6:7-15			4:30-37
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.			6:7-15			
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.			6:7-15			4:30-37
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.		1:61-2:11				4:15-29
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.			6:7-15			
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.			6:7-15			
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			6:7-15			4:30-37

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	55	56	57	58	59	60
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.			6:7-15			
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.			6:7-15			4:30-37
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.		1:61-2:11				4:15-29
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.			6:7-15			
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.			6:7-15			
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.						
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						

Exhibit D:
Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	61	62	63	64	65	66
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and		4:30-46		4:23-31	6:64-7:10	1:63-2:17
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.		Fig. 3				
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.		4:30-46		4:23-31	6:64-7:10	1:63-2:17
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	5:10-28	3:28-60		5:44-63	5:20-36	1:63-2:17
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.					6:64-7:10	3:24-33
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.		Fig. 3				
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.					6:56	
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.	4:28-48					
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and		4:30-46		4:23-31	6:64-7:10	1:63-2:17

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	61	62	63	64	65	66
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.		Fig. 3				
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.		4:30-46		4:23-31	6:64-7:10	1:63-2:17
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	5:10-28	3:28-60		5:44-63	5:20-36	1:63-2:17
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.					6:64-7:10	3:24-33
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.		Fig. 3				
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.					6:56	
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.	4:28-48					

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	67	68	69	70	71	72
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	4:4-11	2:65-3:22		2:67-3:8		
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.	4:4-11			2:67-3:8		2:29-36
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	4:4-11	2:65-3:22		2:67-3:8		
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	4:37-52	4:33-43	3:13-16	2:37-46	3:43-53	2:36-41
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.	4:4-11			2:67-3:8		
13. The method of claim 1 wherein						
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.	4:4-11			2:67-3:8		2:29-36
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	4:4-11	2:65-3:22		2:67-3:8		

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	67	68	69	70	71	72
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.	4:4-11			2:67-3:8		2:29-36
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	4:4-11	2:65-3:22		2:67-3:8		
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	4:37-52	4:33-43	3:13-16	2:37-46	3:43-53	2:36-41
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.	4:4-11			2:67-3:8		
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.	4:4-11			2:67-3:8		2:29-36
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.						
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	73
3. The method of claim 1 further comprising	
immersing the target site within a volume of the electrically conductive fluid and	3:60-4:3
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.	
4. The method of claim 1 further comprising	
delivering the electrically conductive fluid to the target site.	3:60-4:3
9. The method of claim 1 wherein	
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	6:8-22
11. The method of claim 1 wherein	
the electrically conductive fluid comprises isotonic saline.	
13. The method of claim 1 wherein	
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.	
18. The method of claim 1 further comprising	
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.	
21. The method of claim 1 wherein	
the voltage is in the range from 500 to 1400 volts peak to peak.	
26. The method of claim 23 further comprising	
immersing the target site within a volume of the electrically conductive fluid and	3:60-4:3

Exhibit D:

Examples of where each limitation of the dependent claims of the '592 patent may be found in each reference.

claim text \ reference	73
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.	
27. The method of claim 23 further comprising	
delivering the electrically conductive fluid to the target site.	3:60-4:3
30. The method of claim 23 wherein	
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	6:8-22
32. The method of claim 23 wherein	
the electrically conductive fluid comprises isotonic saline.	
34. The method of claim 23 wherein	
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.	
39. The method of claim 23 further comprising	
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.	
42. The method of claim 23 wherein	
the voltage is in the range from 500 to 1400 volts peak to peak.	

Exhibit E:
Anticipation and obviousness contentions

Smith & Nephew contends that the following claims are anticipated by at least each of the following primary references. Smith & Nephew reserves the right to supplement this contention in the event ArthroCare changes its construction of the asserted claims, or in the event the Court's construction of the asserted claims differs.

Patent	Claim	References
536	46	8, 15, 23, 29, 31, 48, 51, 52
	47	23, 31, 48, 51
	55	8, 15, 22, 23, 26, 29, 31, 36, 38, 48, 51, 52, 65
	56	8, 15, 26, 29, 31, 36, 38, 51, 52
	58	22, 23, 26, 29, 38, 65
	59	22, 23, 26, 29
882	1	8, 15, 26, 38, 48, 51, 52, 65
	13	15, 26, 52, 65
	17	26
	18	26
	21	26, 52
	23	8, 26, 38, 48, 51, 52, 65
	24	8, 26, 38, 48, 51, 52, 65
	29	15, 26, 65
	47	26, 29, 38
	48	26, 29
	49	26, 29
	50	26, 29, 65
	54	48
592	3	8, 15, 23, 26, 31, 48, 51
	4	8, 15, 23, 26, 31, 48, 51
	9	8, 15, 23, 26, 31, 48, 51
	11	8, 23, 26, 31, 48, 51
	13	8, 15, 23, 26, 31, 48, 51
	18	8, 15, 26, 48, 51
	21	23, 26
	26	8, 15, 31, 48, 51
	27	8, 15, 31, 48, 51
	30	8, 15, 31, 48, 51
	32	8, 31, 48, 51
	34	8, 15, 31, 34, 48, 51
	39	8, 15, 48, 51
	42	

Smith & Nephew also contends that the following claims would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least each of the following combinations of primary references, which Smith & Nephew contends would have been combined for at least the following reasons. Smith & Nephew reserves the right to supplement this contention in the event ArthroCare changes its construction of the asserted claims, or in the event the Court's construction of the asserted claims differs.

Patent	Claim	Combinations	Motivation to Combine
536	46	10 with any one or more of 22, 26, 36, 38, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	47	Any one or more of 8, 15, 26, 29, 36, 52 with any one or more of 10, 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	55	10 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	56	34 with any one or more of 48, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	58	Any one or more of 8, 15, 31, 48, 51, 52 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

Patent	Claim	Combinations	Motivation to Combine
	59	32 with any one or more of 8, 15, 31, 38, 48, 51, 52, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
882	1	10 with any one or more of 22, 23, 29, 31, 34, 36; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	13	Any one or more of 10, 29 with any one or more of 8, 38, 48, 51; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	17	Any one or more of 23, 29, 32 with any one or more of 8, 15, 38, 48, 51, 52, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	18	Any one or more of 23, 29, 32 with any one or more of 8, 15, 38, 48, 51, 52, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	21	Any one or more of 31, 36 with any one or more of 8, 15, 38, 48, 51, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	23	Any one or more of 22, 23, 29, 31, 36 with 15; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

Patent	Claim	Combinations	Motivation to Combine
	24	Any one or more of 22, 23, 29, 36 with 15; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	29	Any one or more of 10, 48, 52 with any one or more of 8, 29; any one or more of the preceding with any one or more of the anticipating references listed above; 38, 51 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	47	Any one or more of 22, 31, 36 with any one or more of 8, 15, 48, 51, 52, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	48	Any one or more of 23, 32 with any one or more of 8, 15, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	49	32 with any one or more of 8, 15, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	50	Any one or more of 8, 15 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	54	31 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

Patent	Claim	Combinations	Motivation to Combine
592	3	Any one or more of 22, 29, 36, 52 with 34; any one or more of the preceding with any one or more of the anticipating references listed above; 38, 65 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	4	Any one or more of 22, 29, 36, 38, 52, 65 with 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	9	Any one or more of 10, 22, 29, 36, 38, 52, 65 with 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	11	Any one or more of 22, 29, 36, 38, 52, 65 with any one or more of 15, 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	13	Any one or more of 22, 29, 36, 52 with 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	18	Any one or more of 10, 38, 52, 65 with any one or more of 23, 31, 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

Patent	Claim	Combinations	Motivation to Combine
	21	Any one or more of 29, 32 with any one or more of 8, 15, 31, 34, 48, 51; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	26	Any one or more of 22, 23, 26, 29, 36, 52 with 34; any one or more of the preceding with any one or more of the anticipating references listed above; 38, 65 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	27	Any one or more of 22, 23, 26, 29, 36, 38, 52, 65 with 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	30	Any one or more of 10, 22, 23, 26, 29, 36, 38, 52, 65 with 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	32	Any one or more of 22, 23, 26, 29, 36, 38, 52, 65 with any one or more of 15, 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	34	Any one or more of 22, 23, 26, 29, 36, 52 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

Patent	Claim	Combinations	Motivation to Combine
	39	Any one or more of 10, 26, 38, 52, 65 with any one or more of 31, 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	42	Any one or more of 23, 26, 29, 32 with any one or more of 8, 15, 31, 34, 48, 51; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

THIS PAGE BLANK (USPTO)

FISH & RICHARDSON P.C.

500 Arguello Street
Suite 500
Redwood City, California
94063-1526

Telephone
650 839-5070

Facsimile
650 839-5071

Web Site
www.fr.com

BY FAX AND MAIL

October 9, 2002

Perry Clark, Esquire
Weil, Gotshal & Manges LLP
201 Redwood Shores Parkway
Redwood Shores, CA 94065

Re: Arthrocare Suit - Delaware
USDC-D. Del. - C.A. No. 01-504-SLR

Dear Perry:

I have enclosed a supplemental set of invalidity claim charts.

Very truly yours,

Kurtis MacFerrin

cc: Jack B. Blumenfeld, Esq., Morris, Nichols, Arsht & Tunnell (fax only)

50107269.doc

Exhibit A:
Prior art references upon which Smith & Nephew presently intends to primarily rely.

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
8	00/00/76	Acta Medicotechnica (Medizinal-Markt), Vol. 24, No. 4, 1976 129 – 134	E. Elsasser and E. Roos	Uber ein Instrument zur leckstromfreien transurethralen Resection (Concerning An Instrument for Transurethral resection without leakage of current)
10	07/20/76	US 3,970,088	Charles F. Morrison	Electrosurgical Devices Having Sesquipolar Electrode Structures Incorporated Therein
15	09/26/78	US 4,116,198 and its file history	Eberhard Roos	Electro-Surgical Device
22	04/27/82	US 4,326,529	James D. Doss and Richard L. Hutson	Corneal-Shaping Electrode
23	04/26/83	US 4,381,007	James D. Doss	Multipolar Corneal-Shaping Electrode with Flexible Removable Skirt
26	06/00/85	JACC Vol. 5, No. 6, 1382-6	Cornelis J. Slager, MSc, Catharina E. Essed, MD, Johan C.H. Schuurbiers, BSc, Nicolaas Bom, Ph.D, Patrick W. Serruys, MD, Geert T. Meester, MD, FACC	Vaporization of Atherosclerotic Plaques by Spark Erosion
29	00/00/87	Kardiologie, Kardiol.76: Supp. 6, 67-71 (1987)	C.J. Slager, A.C. Phaff, C.E. Essed, J.C.H. Schuurbiers, N. Bom, V.A. Vandenbroucke, and P.W. Serruys	Spark Erosion of Arteriosclerotic Plaques
31	06/23/87	US 4,674,499	David S.C. Pao	Coaxial Bipolar Probe
32	07/00/88	Valleylab Part Number 945 100 102 A	Valleylab, Inc.	Surgistat Service Manual

#	Issue/ Pub'n Date	Patent Number/ Publication	Inventor/Author	Title
34	00/00/89	SPIE Vol. 1068 Catheter-based Sensing and Imaging Technology	Paul C. Nardella	Radio Frequency Energy and Impedance Feedback
36	02/21/89	US 4,805,616	David S.C. Pao	Bipolar Probes for Ophthalmic Surgery and Methods of Performing Anterior Capsulotomy
38	04/00/89	JACC Vol. 13 No. 5, 1167-75	Benjamin I. Lee, MD, FACC, Gary J. Becker, MD, Bruce F. Waller, MD, FACC, Kevin J. Barry, MS, Raymond J. Connolly, Ph.D, Jonathan Kaplan, MD, Alan R. Shapiro, MS, Paul C. Nardella, BS	Thermal Compression and Molding of Atherosclerotic Vascular Tissue With Use of Radiofrequency Energy: Implications for Radiofrequency Balloon Angioplasty
48	12/11/90	US 4,976,711	David J. Parins, Mark A. Rydell, Peter Stasz	Ablation Catheter With Selectively Deployable Electrodes
51	04/16/91	US 5,007,908	Mark A. Rydell	Electrosurgical Instrument Having Needle Cutting Electrode And Spot-Coag Electrode
52	04/23/91	US 5,009,656	Harry G. Reimels	Bipolar Electrosurgical Instrument
74	1990		Jerry L. Malis, Valley Forge Scientific Corp.	CMC-III Bipolar System

Exhibit B:

Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6	7
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:							
a high frequency power supply;	1:15-27	207	3:48-4:14	1:5-2:2	58-60	3:3-7	2:44-66
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	1:40-55, Fig. 1		8:10-9:8	1:5-2:2	58-60	3:3-7, Fig. 1, 2	4:4-19, 2:44-66
an electrode terminal disposed near the distal end, and	1:40-55, Fig. 1		8:10-9:8	1:5-2:2	58-60	3:3-7, Fig. 1, 2	4:4-19, 2:44-66
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	1:40-55, Fig. 1		8:10-9:8	1:5-2:2	58-60	3:3-7, Fig. 1, 2	4:4-19, 2:44-66
a return electrode electrically coupled to the electrosurgical power supply; and	1:15-27	207	3:48-4:14	1:5-2:2	58-60	3:3-7	2:44-66
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that			9:9-25				
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.			9:9-25				
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.	4:9-24						Fig. 2
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,							3:58-61
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.							
55. The electrosurgical system of claim 45 wherein							

Exhibit B:
Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6	7
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	1:40-55	206	8:10:9:8	3:10-28	58	2:54-57	2:67-3:16
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.						1:45-50	
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.		206-07	3:49-4:14		58		
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).		211			58		

Exhibit B:

Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	8	9	10	11	12	13	14
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:							
a high frequency power supply;	1	2:33-52	4:18-28	2	528	4:15; 7:38-50	
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	3, 7	2:40-63	4:18-28	2	530	6:55-70	
an electrode terminal disposed near the distal end, and	3, 7	2:40-63	4:18-28	2	530	6:55-70	
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	3, 7	2:40-63	4:18-28	2	530	6:55-70	
a return electrode electrically coupled to the electrosurgical power supply; and	1	2:33-52	4:18-28	2	528	4:15; 7:38-50	
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	4-5	2:40-63			529		
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	4-5	2:40-63			529		
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.	7		4:31-43	2			
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,			5:50-57	3			
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.	1						
55. The electrosurgical system of claim 45 wherein							

Exhibit B:
Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	8	9	10	11	12	13	14
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	7	7:58-68	4:44-64	3	530	6:45-54	
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	11	0.0479167		2	527		
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.		1:34-53					
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).		1:34-53					7:26-42

Exhibit B:
Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	15	16	17	18	19	20	21
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:							
a high frequency power supply;	1:5-17	845-46	6:1-30	1:12-37	2:33-46	2:35-58	333
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	4:51-5:20	846	6:1-30	1:12-37	2:33-46	2:35-58	333
an electrode terminal disposed near the distal end, and	4:51-5:20	846	6:1-30	1:12-37	2:33-46	2:35-58	333
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	4:51-5:20	846	6:1-30	1:12-37	2:33-46	2:35-58	333
a return electrode electrically coupled to the electrosurgical power supply; and	1:5-17	845-46	6:1-30	1:12-37	2:33-46	2:35-58	333
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	1:52-56, 5:26-30, 7:59-62	846		3:67-4:3	1:34-38	2:35-58	334
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	1:52-56, 5:26-30, 7:59-62	846		3:67-4:3	1:34-38	2:35-58	334
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.	5:3-10				2:34-46	2:35-58	
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,					2:34-46	2:35-58	
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.	3:5-20						
55. The electrosurgical system of claim 45 wherein							

Exhibit B:
Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	15	16	17	18	19	20	21
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	4:66-5:2	845	3:1-52	1:15-36	2:34-46	2:35-58	333
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	1:18-27	845		2:21-63			334
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.				8:30-39	6:61-68	2:35-58	333
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).				8:30-39	5:46-6:7	2:35-58	333

Exhibit B:

Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	22	23	24	25	26	27	28
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:							
a high frequency power supply;	2:21-58	2:42-68	1425	99	1383	2:38-66	2:23-33
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	2:21-58	2:42-68	1425	99	1383	2:35-66	2:23-33
an electrode terminal disposed near the distal end, and	2:21-58	2:42-68	1425	99	1383	2:35-66	2:23-33
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	2:21-58	2:42-68	1425	99	1383	2:35-66	2:23-33
a return electrode electrically coupled to the electrosurgical power supply; and	2:21-58	2:42-68	1425	99	1383	2:38-66	2:23-33
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	2:21-58	2:42-68	1425	99	1383	3:48-53	2:18, 5:28-31
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	2:21-58	2:42-68	1425	99	1383	3:48-53	2:18, 5:28-31
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.		Fig. 1				3:30-47	
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,		Fig. 1-2				3:30-47	
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.		2:42-68			1383		
55. The electrosurgical system of claim 45 wherein							

Exhibit B:

Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	22	23	24	25	26	27	28
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	2:41-43	Fig. 9; 3:29-30	1425	100	1383	1:26-50	1:57-2:6
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.			1426	100	1383	1:26-50	
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.	3:46-51	3:30-38	1425		1383		7:62-8:14
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).	3:46-51	3:30-38	1425		1383		

Exhibit B:

Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	29	30	31	32	33	34	35
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:							
a high frequency power supply;	67-68	4:32-5:10	2:45-58		2:45-69	42	248
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	67-68	4:32-5:10	2:45-58		2:45-69		248
an electrode terminal disposed near the distal end, and	67-68	4:32-5:10	2:45-58		2:45-69		248
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	67-68	4:32-5:10	2:45-58		2:45-69		248
a return electrode electrically coupled to the electrosurgical power supply; and	67-68	4:32-5:10	2:45-58		2:45-69	42	248
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	68		3:31, 7:65				248
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	68		3:31, 7:65				248
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.	69		4:55-5:16				
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,	69		4:55-5:16				
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.		Fig. 5	Fig. 4		Fig. 2	44	
55. The electrosurgical system of claim 45 wherein							

Exhibit B:
Examples of where each limitation of the claims
of the '536 patent may be found in each reference.

claim text \ reference	29	30	31	32	33	34	35
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	68	5:11-27	5:17-31				
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	68		9:37-47			42	
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.	68				2:45-3:16	42	
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).	68			8	2:45-3:16		

Exhibit B:

Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	36	37	38	39	40	41	42
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:							
a high frequency power supply;	4:4-39	662-63	1168	5:1-47	2:62-65	291	275
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	4:4-39	662-63	1169	5:1-47	2:19-22	292	275
an electrode terminal disposed near the distal end, and	4:4-39	662-63	1169	5:1-47	2:19-22	292	275
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	4:4-39	662-63	1169	5:1-47	2:19-22	292	275
a return electrode electrically coupled to the electrosurgical power supply; and	4:4-39	662-63	1168	5:1-47	2:62-65	291	275
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	7:30-32	663	1168			291	275
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	7:30-32	663	1168			291	275
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.				Fig. 5; 8:9-34	4:16-28	292	275
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,	4:4-39			Fig. 5; 8:9-34	4:36-43	292	275
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.							
55. The electrosurgical system of claim 45 wherein							

Exhibit B:
Examples of where each limitation of the claims
of the '536 patent may be found in each reference.

claim text \ reference	36	37	38	39	40	41	42
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	4:40-58	662	1168	Fig. 5; 8:9-34	4:16-35	292	275
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	2:16-34		1168	3:63-4:16	5:62-6:19	291	275
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.			1168		2:62-65		
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).							

Exhibit B:
Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48	49
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:							
a high frequency power supply;	2:8-4:10	2:26-51	4:21-5:6	2:31-53	1:34	2:28	1:55
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	8, 10	2:26-51	4:40	2:31-53		2:28	1:55
an electrode terminal disposed near the distal end, and	8, 10	2:26-51	4:40	2:31-53		2:28	1:55
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	8, 10	2:26-51	4:40	2:31-53		2:28	1:55
a return electrode electrically coupled to the electrosurgical power supply; and	2:8-4:10	2:26-51	4:21-5:6	2:31-53	1:34	2:28	1:55
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	11		3:48-55	6:42		6:28, 4:6	1:65
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	11		3:48-55	6:42		6:28, 4:6	1:65
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.				3:41-4:2	1:57-2:35	4:18-28	
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,				3:41-4:2	1:57-2:35	4:18-28	
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.			inherent	6:42		6:28	
55. The electrosurgical system of claim 45 wherein							

Exhibit B:
Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48	49
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	2:8-18	3:48-51	5:7-19	3:41-4:2	1:57-2:35	3:65-4:17	3:27-44
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	1:1-4	3:6-25		3:8-34	1:18-39		1:47-68
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.		3:36-41		6:5-30			
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).							

Exhibit B:
Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	50	51	52	53	54	55	56
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:							
a high frequency power supply;	2:21-63	2:41-3:58	3:1-32	2:28-55	670	2:7-46	1:61-2:12
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	2:21-63	2:41-3:58	3:1-32	2:28-55	669	2:7-46	1:61-2:12
an electrode terminal disposed near the distal end, and	2:21-63	2:41-3:58	3:1-32	2:28-55	669	2:7-46	1:61-2:12
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	2:21-63	2:41-3:58	3:1-32	2:28-55	669	2:7-46	1:61-2:12
a return electrode electrically coupled to the electrosurgical power supply; and	2:21-63	2:41-3:58	3:1-32	2:28-55	670	2:7-46	1:61-2:12
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that		3:53	2:26	3:63, 2:1	672		
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.		3:53	2:26	3:63, 2:1	672		
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.	3:17-23	3:35-57	2:63-3:5	3:37-64		2:62-68	1:61-2:11
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,	3:17-23	3:35-57	1:42-50	3:37-64		2:62-68	
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.		3:53					
55. The electrosurgical system of claim 45 wherein							

Exhibit B:
Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	50	51	52	53	54	55	56
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	1:40-51	3:35-57	1:42-50	3:37-64	670		1:61-2:11
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	2:2-20	1:9-12	1:5-9	1:9-15	669	1:52-55	1:50-58
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.					669		
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).					672		

Exhibit B:

Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	57	58	59	60	61	62	63
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:							
a high frequency power supply;	3	3:9-49		4:45	3:30	2:35	
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	3	3:9-49	3:5-36	3:35	3:30	2:20	
an electrode terminal disposed near the distal end, and	3	3:9-49	3:5-36	3:35	3:30	2:20	
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	3	3:9-49	3:5-36	3:35	3:30	2:20	
a return electrode electrically coupled to the electrosurgical power supply; and	3	3:9-49		4:45	3:30	2:35	
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that	6						
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.	6						
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.		4:27-33		3:52-66		3:12-27	
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,				3:52-66		3:12-27	
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.						Fig. 3	
55. The electrosurgical system of claim 45 wherein							

Exhibit B:
Examples of where each limitation of the claims
of the '536 patent may be found in each reference.

claim text \ reference	57	58	59	60	61	62	63
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.				4:15-29	5:10-28	3:28-60	
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	4:20-5:5	3:30-49	1:5-12			2:14-20	3:21-32
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.					4:28-48		
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).					4:28-48		3:21-32

Exhibit B:

Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	64	65	66	67	68	69	70
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:							
a high frequency power supply;	2:5	5:34	2:1	2:35	3:25	3:20	2:38
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	4:25	5:34	3:14	2:35	3:25	3:20	2:38
an electrode terminal disposed near the distal end, and	4:25	5:34	3:14	2:35	3:25	3:20	2:38
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	4:25	5:34	3:14	2:35	3:25	3:20	2:38
a return electrode electrically coupled to the electrosurgical power supply; and	2:5	5:34	2:1	2:35	3:25	3:20	2:38
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that		2:10, 6:65	2:10	4:10			3:1
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.		2:10, 6:65	2:10	4:10			3:1
46. An electrosurgical system as in claim 45, wherein							
the return electrode forms a portion of the shaft of the electrosurgical probe.				4:37-52	4:33-43		2:37-46
47. An electrosurgical system as in claim 46 further including							
an insulating member circumscribing the return electrode,				4:37-52	4:33-43		2:58-66
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.							
55. The electrosurgical system of claim 45 wherein							

Exhibit B:
Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	64	65	66	67	68	69	70
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	5:44-63	5:20-36	1:63-2:17	4:37-52	4:33-43	3:13-16	2:37-46
56. The electrosurgical system of claim 45 wherein							
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.	15:62-16:7			1:10-15			
58. The electrosurgical system of claim 45 wherein							
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.		6:25-40					
59. The electrosurgical system of claim 45 wherein							
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).							

Exhibit B:

Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	71	72	73	74
45. An electrosurgical system for applying electrical energy to a target site on a structure within or on a patient's body, the system comprising:				
a high frequency power supply;	3:43-4:18	2:30	4:35	SN61173
an electrosurgical probe comprising a shaft having a proximal end and a distal end,	Figs. 1-6	2:30	4:35	SN61187
an electrode terminal disposed near the distal end, and	Figs. 1-6	2:30	4:35	SN61187
a connector near the proximal end of the shaft electrically coupling the electrode terminal to the electrosurgical power supply;	Figs. 1-6	2:30	4:35	SN61187
a return electrode electrically coupled to the electrosurgical power supply; and	3:43-4:18	2:30	4:35	SN61173
an electrically conducting fluid supply for directing electrically conducting fluid to the target site such that				SN61187
the electrically conducting fluid generates a current flow path between the return electrode and the electrode terminal.				SN61187
46. An electrosurgical system as in claim 45, wherein				
the return electrode forms a portion of the shaft of the electrosurgical probe.			5:36-58	SN61186
47. An electrosurgical system as in claim 46 further including				
an insulating member circumscribing the return electrode,			5:36-58	SN61184
the return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between the return electrode and the patient's tissue.		2:29-36		SN61173
55. The electrosurgical system of claim 45 wherein				

Exhibit B:

Examples of where each limitation of the claims of the '536 patent may be found in each reference.

claim text \ reference	71	72	73	74
the electrode terminal comprises a single active electrode disposed near the distal end of the shaft.	3:43-53	2:36-41	6:8-22	SN61173
56. The electrosurgical system of claim 45 wherein				
the target site is selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.		2:63-68	3:26-34	SN61183
58. The electrosurgical system of claim 45 wherein				
the frequency of the voltage applied between the return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.				SN61173
59. The electrosurgical system of claim 45 wherein				
the voltage applied between the electrode terminal and the return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS).			6:23-33	SN61173

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	1:15-27	207	3:48-4:14	1:5-2:2	58-60	3:3-7
a return electrode electrically coupled to a high frequency voltage source;	1:15-27	207		1:5-2:2	58-60	3:3-7
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and		211	9:9-25	1:38-44		
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.					58,61	
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.						
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.		211			58	
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		211			58	
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						3:22-40
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.			5:3-5			
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.			5:3-5			
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	1:15-27	207	3:48-4:14	1:5-2:2	58-60	3:3-7

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and		211	9:9-25	1:38-44		
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.					58	
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and			inherent		58,61	
inducing the discharge of photons to the target site in contact with the vapor layer.						
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.			2:36-3:25			
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.		211			58	
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		211			58	
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48 further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.			8:10-9:8	3:10-28		

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	7	8	9	10	11	12
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:44-66	1	2:33-52	4:18-28	2	528
a return electrode electrically coupled to a high frequency voltage source;	2:44-66	1	2:33-52	4:18-28	2	528
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and		5	2:40-63			528
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1,6		6:54-7:5		
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.				5:58-66		
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.			1:34-53			
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.			1:34-53			
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.	3:17-32				2:1-14	
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.		inherent				529
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.		inherent				529
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled to a high frequency v ltage source;	2:44-66	1	2:33-52	4:18-28	2	528

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	7	8	9	10	11	12
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and		5	2:40-63			528
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.		1				
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and		1,6		6:54-7:5		
inducing the discharge of photons to the target site in contact with the vapor layer.				5:58-66		
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.					3	
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.			1:34-53			
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.			1:34-53			
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48 further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.			2:40-63			

Exhibit C:
Examples of where each limitation of the claims
of the '882 patent may be found in each reference.

claim text \ reference	13	14	15	16	17	18
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	4:15; 7:38-50		1:5-17	845-46	6:1-30	1:12-37
a return electrode electrically coupled to a high frequency voltage source;	4:15; 7:38-50		1:5-17	845-46	6:1-30	1:12-37
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and			5:26-30	848		3:67-4:3
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.	4:47		1:33-40			inherent
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.			3:31-33	845		
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.		7:26-42;Fig. 6				8:30-39
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		7:26-42;Fig.6				
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.						
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.						
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	4:15; 7:38-50		1:5-17	845-46	6:1-30	1:12-37

Exhibit C:
Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	13	14	15	16	17	18
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and			5:26-30	848		3:67-4:3
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.			5:53-54, 6:27-29	848		
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and	4:47		1:33-40			inherent
inducing the discharge of photons to the target site in contact with the vapor layer.			3:31-33	845		
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.	11:62-12:34					
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.		7:26-42; Fig. 6				8:30-39
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		7:26-42; Fig. 6				
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48 further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.						

Exhibit C:
Examples of where each limitation of the claims
of the '882 patent may be found in each reference.

claim text \ reference	19	20	21	22	23	24
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:33-46	2:35-58	333	2:21-58	2:42-68	1425
a return electrode electrically coupled to a high frequency voltage source;	2:33-46	2:35-58	333	2:21-58	2:42-68	1425
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	1:34-38	2:35-58	334	2:21-58	2:42-68; 3:66	1425
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.						
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.					3:30-38	
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.					3:30-38	
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.			334	2:47-51	3:65-68	1426
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.			334	2:47-51;Fig. 1	3:65-68	1426
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	2:33-46	2:35-58	333	2:21-58	2:42-68	1425

Exhibit C:
Examples of where each limitation of the claims
of the '882 patent may be found in each reference.

claim text \ reference	19	20	21	22	23	24
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	1:34-38	2:35-58	334	2:21-58	2:42-68; 3:66	1425
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.			337			
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and						
inducing the discharge of photons to the target site in contact with the vapor layer.						
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.			333	5:31-33		1425
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.					3:30-38	
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48 further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.						

Exhibit C:
Examples of where each limitation of the claims
of the '882 patent may be found in each reference.

claim text \ reference	25	26	27	28	29	30
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	99	1383	2:38-66	2:23-33	67-68	4:32-5:10
a return electrode electrically coupled to a high frequency voltage source;	99	1383	2:38-66	2:23-33	67-68	4:32-5:10
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	100	1383	1:18; 3:48-53	5:28-31	68	4:48-58
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1382-83	inherent			inherent
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.		1382			68	5:11-27
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.		1383			68	
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		1383			68	
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.		1383				
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.	100	1383		1:57-2:6	68	
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.	100	1383		1:57-2:6	68	7:3-8:5
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	99	1383	2:38-66	2:23-33	67-68	4:32-5:10

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	25	26	27	28	29	30
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	100	1383	1:18; 3:48-53	5:28-31	68	4:48-58
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.		1383			68-70	
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and		1382-83	inherent			inherent
inducing the discharge of photons to the target site in contact with the vapor layer.		1382			68	5:11-27
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.		1383			68	
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.		1383			68	
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		1383			68	
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.		1383-84			68	
54. The method of claims 23 or 48 further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.						

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	31	32	33	34	35	36
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:45-58		2:45-69	42	248	4:4-39
a return electrode electrically coupled to a high frequency voltage source;	2:45-58		2:45-69	42	248	4:4-39
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	3:31; 7:65		2:45-69	43	248	7:30-32
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.						
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.		8				
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		8				
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.	2:45-67					6:34-37
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.	7:3-8:5		5:4-30		248	7:26-52
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.					248	7:26-52
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	2:45-58		2:45-69	42	248	4:4-39

Exhibit C:
Examples of where each limitation of the claims
of the '882 patent may be found in each reference.

claim text \ reference	31	32	33	34	35	36
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	3:31; 7:65		2:45-69	43	248	7:30-32
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.						
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and						
inducing the discharge of photons to the target site in contact with the vapor layer.						
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.	6:14-37					5:5-20
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.		8				
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		8				
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48 further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.	2:45-3:10					

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	37	38	39	40	41	42
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	662-63	1168	5:1-47	2:62-65	291	275
a return electrode electrically coupled to a high frequency voltage source;	662-63	1168	5:1-47	2:62-65	291	275
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	663	1168		2:37-42	291	275
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1170				
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.			1:26-37			
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.	662	1168		5:62-6:19	291	275
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.	662	1168			291	275
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled t a high frequency voltage source;	662-63	1168	5:1-47	2:62-65	291	275

Exhibit C:
Examples of where each limitation of the claims
of the '882 patent may be found in each reference.

claim text \ reference	37	38	39	40	41	42
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	663	1168		2:37-42	291	275
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.					293	276
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and		1170				
inducing the discharge of photons to the target site in contact with the vapor layer.			1:26-37			
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.		1168		5:59-61		
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48 further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.				5:43-53		

Exhibit C:
Examples of where each limitation of the claims
of the '882 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:8-4:10	2:26-51	4:21-5:6	2:31-53	1:34	2:28
a return electrode electrically coupled to a high frequency voltage source;	2:8-4:10	2:26-51	4:21-5:6	2:31-53	1:34	2:28
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	11		3:48-55	6:42	6:4-60	5:39
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	inherent		inherent
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.						
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.			3:48-4:7	6:39-45		5:65-6:19
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.			3:48-4:7			5:65-6:19
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	2:8-4:10	2:26-51	4:21-5:6	2:31-53	1:34	2:28

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	11		3:48-55	6:42	6:4-60	5:39
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.		1:66-68	3:64-65			
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and			inherent	inherent		inherent
inducing the discharge of photons to the target site in contact with the vapor layer.						
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.						
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48 further c mprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.	2:8-18		3:40-47	6:39-45		3:65-4:17

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	49	50	51	52	53	54
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	1:55	2:21-63	2:41-3:58	3:1-32	2:28-55	670
a return electrode electrically coupled to a high frequency voltage source;	1:55	2:21-63	2:41-3:58	3:1-32	2:28-55	670
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	1:65	2:2-20	3:53	1:38	3:63-2:1	672
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	4:10		
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.				4:3-18		670
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.						670
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.	3:45-68		3:35-57	2:24-29		
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.			3:35-57	2:24-29		
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	1:55	2:21-63	2:41-3:58	3:1-32	2:28-55	670

Exhibit C:
Examples of where each limitation of the claims
of the '882 patent may be found in each reference.

claim text \ reference	49	50	51	52	53	54
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	1:65	2:2-20	3:53	1:38	3:63-2:1	672
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.						
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and			inherent	4:10		
inducing the discharge of photons to the target site in contact with the vapor layer.				4:3-18		670
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.		3:40-50				
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.						670
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48 further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.	5:16-23					

Exhibit C:
Examples of where each limitation of the claims
of the '882 patent may be found in each reference.

claim text \ reference	55	56	57	58	59	60
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:7-46	1:61-2:12	3	3:9-49		4:45
a return electrode electrically coupled to a high frequency voltage source;	2:7-46	1:61-2:12	3	3:9-49		4:45
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	1:52-55		6			5:40
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.	3:15-31			1:42-53		
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.			6:7-15			
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.			6:7-15			
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	2:7-46	1:61-2:12	3	3:9-49		4:45

Exhibit C:
Examples of where each limitation of the claims
of the '882 patent may be found in each reference.

claim text \ reference	55	56	57	58	59	60
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	1:52-55		6			5:40
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.			7			
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and						
inducing the discharge of photons to the target site in contact with the vapor layer.	3:15-31			1:42-53		
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.						
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48 further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.						

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	61	62	63	64	65	66
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	3:30	2:35		2:5	5:34	2:1
a return electrode electrically coupled to a high frequency voltage source;	3:30	2:35		2:5	5:34	2:1
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	11:65-66	4:10-29			2:10; 6:65	2:10
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.					6:56	
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.	13:3-4	4:6-9	4:21-32		6:50-63	1:63-2:17
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.	4:28-48		3:21-32			
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.	4:28-48					
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.					6:64-7:10	3:24-33
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.					6:64-7:10	3:24-33
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	3:30	2:35		2:5	5:34	2:1

Exhibit C:
Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	61	62	63	64	65	66
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	11:65-66	4:10-29			2:10; 6:65	2:10
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.	12:35				inherent	
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and					6:56	
inducing the discharge of photons to the target site in contact with the vapor layer.	13:3-4	4:6-9	4:21-32		6:50-63	1:63-2:17
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.						
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.	4:28-48		3:21-32			
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.	4:28-48					
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.					5:55-61; 8:19-31	
54. The method of claims 23 or 48 further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.		4:30-46				

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	67	68	69	70	71	72
1. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and	2:35	3:25	3:20	2:38	3:43-4:18	2:30
a return electrode electrically coupled to a high frequency voltage source;	2:35	3:25	3:20	2:38	3:43-4:18	2:30
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	4:10			3:1		4:33
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
13. The method of claim 1 wherein						
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.			1:22-34		7:17-37	
17. The method of claim 1 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
18. The method of claim 1 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
21. The method of claim 1 wherein						
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.						
23. The method of claim 1 wherein						
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.	4:4-11			2:67-3:8		
24. The method of claim 1 wherein						
the liquid phase of the electrically conductive fluid comprises isotonic saline.	4:4-11			2:67-3:8		
28. A method for applying energy to a target site on a patient body structure comprising:						
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	2:35	3:25	3:20	2:38	3:43-4:18	2:30

Exhibit C:
Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	67	68	69	70	71	72
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	4:10			3:1		4:33
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.						
29. The method of claim 28 wherein the applying step comprises:						
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and						
inducing the discharge of photons to the target site in contact with the vapor layer.			1:22-34		7:17-37	
47. The method of claims 23 or 48 wherein						
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.						2:42-54
48. The method of claims 26 and 28 wherein						
the high frequency voltage is at least 200 volts peak to peak.						
49. The method of claims 26 and 28 wherein						
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.						
50. The method of claims 26 and 28 wherein						
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.						
54. The method of claims 23 or 48 further comprising						
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.	3:64-4:3	2:65-3:22		3:44-53		

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	73	74
1. A method for applying energy to a target site on a patient body structure comprising:		
providing an electrode terminal and	4:35	SN61173
a return electrode electrically coupled to a high frequency voltage source;	4:35	SN61173
positioning the active electrode in close proximity to the target site in the presence of an electrically conducting terminal [sic]; and	6:45-55	SN61174
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		SN61173
13. The method of claim 1 wherein		
at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.	2:22-34	
17. The method of claim 1 wherein		
the high frequency voltage is at least 200 volts peak to peak.	6:23-33	SN61173
18. The method of claim 1 wherein		
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		SN61173
21. The method of claim 1 wherein		
the distance between the most proximal portion of the electrode terminal and the most distal portion of the return electrode is in the range from 0.5 to 10 mm.		SN61186
23. The method of claim 1 wherein		
the liquid phase of the electrically conducting fluid has a conductivity greater than 2 mS/cm.		SN61174
24. The method of claim 1 wherein		
the liquid phase of the electrically conductive fluid comprises isotonic saline.		SN61174
28. A method for applying energy to a target site on a patient body structure comprising:		
providing an electrode terminal and a return electrode electrically coupled to a high frequency voltage source;	4:35	SN61173

Exhibit C:

Examples of where each limitation of the claims of the '882 patent may be found in each reference.

claim text \ reference	73	74
positioning the electrode terminal in close proximity to the target site in the presence of an electrically conducting fluid; and	6:45-55	SN61174
applying a high frequency voltage between the electrode terminal and the return electrode, the high frequency voltage being sufficient to impart sufficient energy into the target site to ablate the body structure without causing substantial tissue necrosis below the surface of the body structure underlying the ablated body structure.		SN61171
29. The method of claim 28 wherein the applying step comprises:		
vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal; and		SN61173
inducing the discharge of photons to the target site in contact with the vapor layer.	2:22-34	
47. The method of claims 23 or 48 wherein		
the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2.		SN61173
48. The method of claims 26 and 28 wherein		
the high frequency voltage is at least 200 volts peak to peak.	6:23-33	SN61173
49. The method of claims 26 and 28 wherein		
the high frequency voltage is in the range from about 500 to 1400 volts peak to peak.		SN61173
50. The method of claims 26 and 28 wherein		
the electrode terminal is positioned between 0.02 to 2.0 mm from the target site.		SN61173
54. The method of claims 23 or 48 further comprising		
evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.		inherent

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	2:1-17	206, 211	9:9-25	1:38-44, 1:11-15	58	
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and						
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	1:15-27	207	3:48-4:14	1:5-2:2	58-60	3:3-7
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			5:3-5; 9:8-25			2:55-3:2
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.						
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.			5:3-5; 9:8-25			2:55-3:2
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	1:40-55	206	8:10-9:8	3:10-28	58	2:54-57
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.			5:3-5			
13. The method of claim 1 wherein						

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.						
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent		58,61	
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		211			58	
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	2:1-17	211	9:9-25	1:38-44, 1:11-15	58	
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and						
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	1:15-27	207	3:48-4:14	1:5-2:2	58-60	3:3-7
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			5:3-5; 9:8-25			2:55-3:2
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.						

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	1	2	3	4	5	6
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.			5:3-5; 9:8-25			2:55-3:2
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	1:40-55	206	8:10-9:8	3:10-28	58	2:54-57
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.			5:3-5			
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.						
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent		58,61	
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		211			58	

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	7	8	9	10	11	12
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	3:33-44	1, 4-5	2:40-63	7:2-5		528-29
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and		1				
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	2:44-66	1	2:33-52	4:18-28	2	528
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and		11	2:40-63			529
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.		1, 11				
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.		11	2:40-63			529
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	2:67-3:16	7	7:58-68	4:44-64	3	530
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.		inherent				529
13. The method of claim 1 wherein						

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	7	8	9	10	11	12
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.		1, 11				
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1,6		6:54-7:5		
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.			1:34-53			
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	3:33-44	1, 4-5	2:40-63	7:2-5		528-29
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and		1				
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	2:44-66	1	2:33-52	4:18-28	2	528
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and		11	2:40-63			529
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.		1, 11				

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	7	8	9	10	11	12
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.		11	2:40-63			529
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	2:67-3:16	7	7:58-68	4:44-64	3	530
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.		inherent				529
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.		1, 11				
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.		1,6		6:54-7:5		
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.			1:34-53			

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	13	14	15	16	17	18
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;			1:52-56, 5:26-30, 7:59-62, 3:59-61, 6:23-27	846-47	5:25-33	3:67-4:3
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and			3:5-20			
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	4:15; 7:38-50		1:5-17	845-46	6:1-30	1:12-37
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			7:45-62			1:65-2:21
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.			3:5-20; 5:21-30			
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.			7:45-62			1:65-2:21
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	6:45-54		4:66-5:2	845	3:1-52	1:15-36
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.						
13. The method of claim 1 wherein						

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	13	14	15	16	17	18
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.			3:5-20; 5:21-30			
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.	4:47		1:33-40			inherent
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		7:26-42; Fig. 6				
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;			1:52-56, 5:26-30, 7:59-62, 3:59-61, 6:23-27	846-47	5:25-33	3:67-4:3
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and			3:5-20			
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	4:15; 7:38-50		1:5-17	845-46	6:1-30	1:12-37
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			7:45-62			1:65-2:21
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.			3:5-20; 5:21-30			

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	13	14	15	16	17	18
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.			7:45-62			1:65-2:21
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	6:45-54		4:66-5:2	845	3:1-52	1:15-36
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.						
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.			3:5-20; 5:21-30			
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.	4:47		1:33-40			inherent
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		7:26-42; Fig. 6				

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	19	20	21	22	23	24
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	1:34-38	2:35-58	332, 334	2:21-58	2:42-68	1425
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and					2:42-68	
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	2:33-46	2:35-58	333	2:21-58	2:42-68	1425
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	3:1-16	2:59-3:5	334	2:25-31	2:51-55	1425
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.				2:25-31	2:42-68; 3:65-4:7	1426
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.			334	2:25-31; Figs. 1-2	2:51-55	1425
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	2:34-46	2:35-58	333	2:41-43	Fig. 9; 3:29-30	1425
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.			334	2:47-51; Fig. 1	3:65-68	1426
13. The method of claim 1 wherein						

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	19	20	21	22	23	24
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.				2:25-31	2:42-68; 3:65-4:7	1426
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.					3:30-38	
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	1:34-38	2:35-58	334	2:21-58	2:42-68	1425
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and					2:42-68	
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	2:33-46	2:35-58	333	2:21-58	2:42-68	1425
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	3:1-16	2:59-3:5	334	2:25-31	2:51-55	1425
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.				2:25-31	2:42-68; 3:65-4:7	1426

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	19	20	21	22	23	24
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.			334	2:25-31; Figs. 1-2	2:51-55	1425
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	2:34-46	2:35-58	333	2:41-43	Fig. 9; 3:29-30	1425
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.			334	2:47-51; Fig. 1	3:65-68	1426
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.				2:25-31	2:42-68; 3:65-4:7	1426
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.						
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.					3:30-38	

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	25	26	27	28	29	30
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	99-100	1383	3:48-53	2:18, 5:28-31	68, 71	4:48-58, Fig. 5
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and		1383				Fig. 5
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	99	1383	2:38-66	2:23-33	67-68	4:32-5:10
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	100	1383		5:12-35	68	
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.	100	1383		1:57-2:6	68	Fig. 5
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	100	1383			68	
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	100	1383	1:26-50	1:57-2:6	68	5:11-27
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.	100	1383		1:57-2:6	68	
13. The method of claim 1 wherein						

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	25	26	27	28	29	30
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.	100	1383		1:57-2:6	68	Fig. 5
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1382-83	inherent			inherent
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		1383			68	
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	99-100	1383	3:48-53	2:18, 5:28-31	68	4:48-58, Fig. 5
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and		1383				Fig. 5
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	99	1383	2:38-66	2:23-33	67-68	4:32-5:10
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	100	1383		5:12-35	68	
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.	100	1383		1:57-2:6	68	Fig. 5

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	25	26	27	28	29	30
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	100	1383			68	
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	100	1383	1:26-50	1:57-2:6	68	5:11-27
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.	100	1383		1:57-2:6	68	
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.	100	1383		1:57-2:6	68	Fig. 5
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.		1382-83	inherent			inherent
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		1383			68	

Exhibit D:
Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	31	32	33	34	35	36
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	3:11-26, 3:31, 7:65		2:45-69	43	248	7:30-37
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and	Fig. 4		Fig. 2	44		
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	2:45-58		2:45-69	42	248	4:4-39
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	7:3-8:5		5:4-30		248	7:26-52
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.	Fig. 4		Fig. 2; 5:4-30	44		7:26-52
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	2:45-3:10				248	7:26-52
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	5:17-31					4:40-58
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.	7:3-8:5				248	7:26-52
13. The method of claim 1 wherein						

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	31	32	33	34	35	36
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.	Fig. 4		Fig. 2; 5:4-30	44		7:26-52
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		8				
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	3:11-26, 3:31, 7:65		2:45-69	43	248	7:30-37
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and	Fig. 4		Fig. 2	44		
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	2:45-58		2:45-69	42	248	4:4-39
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	7:3-8:5		5:4-30		248	7:26-52
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.	Fig. 4		Fig. 2; 5:4-30	44		7:26-52

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	31	32	33	34	35	36
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	2:45-3:10				248	7:26-52
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	5:17-31					4:40-58
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.	7:3-8:5				248	7:26-52
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.	Fig. 4		Fig. 2; 5:4-30	44		7:26-52
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.						
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.		8				

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	37	38	39	40	41	42
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	663	1168		2:37-42	291	275-76
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and						
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	662-63	1168	5:1-47	2:62-65	291	275
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	662	1168	1:64-2:17	5:62-6:19	291	275
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.	662					
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	662	1168	1:64-2:17		291	275
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	662	1168	Fig. 5; 8:9-34	4:16-35	292	275
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.	662	1168			291	275
13. The method of claim 1 wherein						

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	37	38	39	40	41	42
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.	662					
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		1170				
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	663	1168		2:37-42	291	275-76
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and						
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	662-63	1168	5:1-47	2:62-65	291	275
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	662	1168	1:64-2:17	5:62-6:19	291	275
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.	662					

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	37	38	39	40	41	42
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	662	1168	1:64-2:17		291	275
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	662	1168	Fig. 5; 8:9-34	4:16-35	292	275
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.	662	1168			291	275
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.	662					
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.		1170				
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	11	4:18-28	3:48-55, 5:6-19	6:42, 4:1	6:4-60	6:28, 4:6, 7:59
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and				6:42		6:28
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	2:8-4:10	2:26-51	4:21-5:6	2:31-53	1:34	2:28
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	11:1-20		3:48-4:7	6:39-45		3:65-4:17
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.			inherent	6:42; 3:8-34		6:28; 5:65-6:19
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	11:1-20		3:48-4:7	6:39-45		3:65-4:17
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	2:8-18	3:48-51	5:7-19	3:41-4:2	1:57-2:35	3:65-4:17
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.			3:48-4:7			5:65-6:19
13. The method of claim 1 wherein						

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.			inherent	6:42; 3:8-34		6:28; 5:65-6:19
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	inherent		inherent
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	11	4:28	3:48-55	6:42, 4:1	6:4-60	6:28, 4:6, 7:59
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and				6:42		6:28
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	2:8-4:10	2:26-51	4:21-5:6	2:31-53	1:34	2:28
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	11:1-20		3:48-4:7	6:39-45		3:65-4:17
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.			inherent	6:42; 3:8-34		6:28; 5:65-6:19

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	43	44	45	46	47	48
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	11:1-20		3:48-4:7	6:39-45		3:65-4:17
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	2:8-18	3:48-51	5:7-19	3:41-4:2	1:57-2:35	3:65-4:17
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.			3:48-4:7			5:65-6:19
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.			inherent	6:42; 3:8-34		6:28; 5:65-6:19
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	inherent		inherent
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	49	50	51	52	53	54
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	1:65	2:2-20	3:50-53	2:26	3:63, 2:1, 6:28	669, 672
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and			3:53			
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	1:55	2:21-63	2:41-3:58	3:1-32	2:28-55	670
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	1:47-68		3:30-34	2:24-29	3:37-64	
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.	1:47-68		3:35-57	1:30-39	3:37-64	
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	1:47-68		3:30-34	2:24-29	3:37-64	
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	3:27-44	1:40-51	3:35-57	1:42-50	3:37-64	670
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.			3:35-57	2:24-29		
13. The method of claim 1 wherein						

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	49	50	51	52	53	54
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.	1:47-68		3:35-57	1:30-39	3:37-64	
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	4:10		
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	1:65	2:2-20	3:50-53	2:26	3:63, 2:1, 6:28	672
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and			3:53			
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	1:55	2:21-63	2:41-3:58	3:1-32	2:28-55	670
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	1:47-68		3:30-34	2:24-29	3:37-64	
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.	1:47-68		3:35-57	1:30-39	3:37-64	

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	49	50	51	52	53	54
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	1:47-68		3:30-34	2:24-29	3:37-64	
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	3:27-44	1:40-51	3:35-57	1:42-50	3:37-64	670
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.			3:35-57	2:24-29		
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.	1:47-68		3:35-57	1:30-39	3:37-64	
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.			inherent	4:10		
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	55	56	57	58	59	60
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	1:52-55, 2:7-46	4:20-50	4, 6		2-3	5:40
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and						
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	2:7-46	1:61-2:12	3	3:9-49		4:45
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			6:7-15			4:30-37
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.			6:7-15			
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.			6:7-15			4:30-37
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.		1:61-2:11				4:15-29
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.			6:7-15			
13. The method of claim 1 wherein						

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	55	56	57	58	59	60
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.			6:7-15			
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	1:52-55, 2:7-46	4:20-50	6		2-3	5:40
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and						
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	2:7-46	1:61-2:12	3	3:9-49		4:45
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and			6:7-15			4:30-37
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.			6:7-15			

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	55	56	57	58	59	60
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.			6:7-15			4:30-37
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.		1:61-2:11				4:15-29
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.			6:7-15			
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.			6:7-15			
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.						
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	61	62	63	64	65	66
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	11:65-66, 4:15	4:10-29	2:26		2:10, 6:65, 8:22	2:10, 5:15
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and		Fig. 3				
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	3:30	2:35		2:5	5:34	2:1
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and		4:30-46		4:23-31	6:64-7:10	1:63-2:17
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.		Fig. 3				
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.		4:30-46		4:23-31	6:64-7:10	1:63-2:17
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	5:10-28	3:28-60		5:44-63	5:20-36	1:63-2:17
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.					6:64-7:10	3:24-33
13. The method of claim 1 wherein						

Exhibit D:
Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	61	62	63	64	65	66
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode		Fig. 3				
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.					6:56	
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.	4:28-48					
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	11:65-66, 4:15	4:10-29	2:26		2:10, 6:65, 8:22	2:10
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and		Fig. 3				
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	3:30	2:35		2:5	5:34	2:1
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and		4:30-46		4:23-31	6:64-7:10	1:63-2:17
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.		Fig. 3				

Exhibit D:

Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	61	62	63	64	65	66
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.		4:30-46		4:23-31	6:64-7:10	1:63-2:17
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	5:10-28	3:28-60		5:44-63	5:20-36	1:63-2:17
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.					6:64-7:10	3:24-33
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.		Fig. 3				
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.					6:56	
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.	4:28-48					

Exhibit D:
Examples of where each limitation of the claims
of the '592 patent may be found in each reference.

claim text \ reference	67	68	69	70	71	72
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:						
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	4:10, 2:35	1:21-44	4:13-17	3:1, 2:45	7:13-15	4:33, 3:9
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and						2:29-36
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	2:35	3:25	3:20	2:38	3:43-4:18	2:30
3. The method of claim 1 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	4:4-11	2:65-3:22		2:67-3:8		
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.	4:4-11			2:67-3:8		2:29-36
4. The method of claim 1 further comprising						
delivering the electrically conductive fluid to the target site.	4:4-11	2:65-3:22		2:67-3:8		
9. The method of claim 1 wherein						
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	4:37-52	4:33-43	3:13-16	2:37-46	3:43-53	2:36-41
11. The method of claim 1 wherein						
the electrically conductive fluid comprises isotonic saline.	4:4-11			2:67-3:8		
13. The method of claim 1 wherein						

Exhibit D:
Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	67	68	69	70	71	72
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.	4:4-11			2:67-3:8		2:29-36
18. The method of claim 1 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.						
21. The method of claim 1 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method c mprising:						
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	4:10, 2:35			3:1, 2:45		4:33, 3:9
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and						2:29-36
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	2:35	3:25	3:20	2:38	3:43-4:18	2:30
26. The method of claim 23 further comprising						
immersing the target site within a volume of the electrically conductive fluid and	4:4-11	2:65-3:22		2:67-3:8		
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.	4:4-11			2:67-3:8		2:29-36

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	67	68	69	70	71	72
27. The method of claim 23 further comprising						
delivering the electrically conductive fluid to the target site.	4:4-11	2:65-3:22		2:67-3:8		
30. The method of claim 23 wherein						
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	4:37-52	4:33-43	3:13-16	2:37-46	3:43-53	2:36-41
32. The method of claim 23 wherein						
the electrically conductive fluid comprises isotonic saline.	4:4-11			2:67-3:8		
34. The method of claim 23 wherein						
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.	4:4-11			2:67-3:8		2:29-36
39. The method of claim 23 further comprising						
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.						
42. The method of claim 23 wherein						
the voltage is in the range from 500 to 1400 volts peak to peak.						

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	73	74
1. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:		
positioning an electrode terminal into at least close proximity with the target site in the presence of an electrically conductive fluid;	6:45-55	SN61187, SN61173
positioning a return electrode within the electrically conductive fluid such that the return electrode is not in contact with the body structure to generate a current flow path between the electrode terminal and the return electrode; and		SN61173
applying a high frequency voltage difference between the electrode terminal and the return electrode such that an electrical current flows from the electrode terminal, through the region of the target site, and to the return electrode through the current flow path.	4:35	SN61173
3. The method of claim 1 further comprising		
immersing the target site within a volume of the electrically conductive fluid and	3:60-4:3	SN61174
positioning the return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and the return electrode.		SN61171, SN61173
4. The method of claim 1 further comprising		
delivering the electrically conductive fluid to the target site.	3:60-4:3	SN61174
9. The method of claim 1 wherein		
the electrode terminal comprises a single active electrode disposed near the distal end of an instrument shaft.	6:8-22	SN61173
11. The method of claim 1 wherein		
the electrically conductive fluid comprises isotonic saline.		SN61174
13. The method of claim 1 wherein		

Exhibit D:

Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	73	74
the return electrode is spaced from the electrode terminal such that when the electrode terminal is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the electrode terminal and the return electrode.		SN61171, SN61173
18. The method of claim 1 further comprising		
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.		SN61173
21. The method of claim 1 wherein		
the voltage is in the range from 500 to 1400 volts peak to peak.		SN61173
23. A method for applying electrical energy to a target site on a body structure on or within a patient's body, the method comprising:		
contacting an active electrode with the body structure in the presence of an electrically conductive fluid;	6:45-55	SN61187, SN61173
spacing a return electrode away from the body structure in the presence of the electrically conductive fluid; and		SN61173
applying a high frequency voltage difference between the active electrode and the return electrode such that an electrical current flows from the active electrode, through the electrically conductive fluid, and to the return electrode.	4:35	SN61173
26. The method of claim 23 further comprising		
immersing the target site within a volume of the electrically conductive fluid and	3:60-4:3	SN61174
positioning the return electrode within the volume of electrically conductive fluid to generate a current flow path between the active electrode and the return electrode.		SN61171, SN61173

Exhibit D:
Examples of where each limitation of the claims of the '592 patent may be found in each reference.

claim text \ reference	73	74
27. The method of claim 23 further comprising		
delivering the electrically conductive fluid to the target site.	3:60-4:3	SN61174
30. The method of claim 23 wherein		
the active electrode comprises a single active electrode disposed near the distal end of an instrument shaft.	6:8-22	SN61173
32. The method of claim 23 wherein		
the electrically conductive fluid comprises isotonic saline.		SN61174
34. The method of claim 23 wherein		
the return electrode is spaced from the active electrode such that when the active electrode is brought adjacent a tissue structure immersed in electrically conductive fluid, the return electrode is spaced from the tissue structure and the electrically conductive fluid completes a conduction path between the active electrode and the return electrode.		SN61171, SN61173
39. The method of claim 23 further comprising		
applying a sufficient high frequency voltage difference to vaporize the electrically conductive fluid in a thin layer over at least a portion of the active electrode and to induce the discharge of energy to the target site in contact with the vapor layer.		SN61173
42. The method of claim 23 wherein		
the voltage is in the range from 500 to 1400 volts peak to peak.		SN61173

Exhibit E:
Anticipation and obviousness contentions

Smith & Nephew contends that the following claims are anticipated by at least each of the following primary references. Smith & Nephew reserves the right to supplement this contention in the event ArthroCare changes its construction of the asserted claims, or in the event the Court's construction of the asserted claims differs.

Patent	Claim	References
536	45	8, 15, 22, 23, 26, 29, 31, 36, 38, 48, 51, 52, 74
	46	8, 15, 23, 29, 31, 48, 51, 52
	47	23, 31, 48, 51
	55	8, 15, 22, 23, 26, 29, 31, 36, 38, 48, 51, 52, 65
	56	8, 15, 26, 29, 31, 36, 38, 51, 52
	58	22, 23, 26, 29, 38, 65
	59	22, 23, 26, 29
882	1	8, 15, 26, 38, 48, 51, 52, 65
	13	15, 26, 52, 65
	17	26
	18	26
	21	26, 52
	23	8, 26, 38, 48, 51, 52, 65
	24	8, 26, 38, 48, 51, 52, 65
	28	8, 15, 26, 29, 74
	29	15, 26, 65
	47	26, 29, 38
	48	26, 29
	49	26, 29
	50	26, 29, 65
	54	48
592	1	8, 15, 23, 26, 31, 34, 48, 51, 74
	3	8, 15, 23, 26, 31, 48, 51
	4	8, 15, 23, 26, 31, 48, 51
	9	8, 15, 23, 26, 31, 48, 51
	11	8, 23, 26, 31, 48, 51
	13	8, 15, 23, 26, 31, 48, 51
	18	8, 15, 26, 48, 51
	21	23, 26
	23	8, 15, 23, 26, 31, 34, 48, 51, 74
	26	8, 15, 31, 48, 51
	27	8, 15, 31, 48, 51
	30	8, 15, 31, 48, 51

Patent	Claim	References
	32	8, 31, 48, 51
	34	8, 15, 31, 34, 48, 51
	39	8, 15, 48, 51
	42	23, 26, 74

Smith & Nephew also contends that the following claims would have been obvious to one of ordinary skill in the art at the time of the invention in view of at least each of the following combinations of primary references, which Smith & Nephew contends would have been combined for at least the following reasons. Smith & Nephew reserves the right to supplement this contention in the event ArthroCare changes its construction of the asserted claims, or in the event the Court's construction of the asserted claims differs.

Patent	Claim	Combinations	Motivation to Combine
536	45	Any one or more of 10, 32, 34 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	46	10 with any one or more of 22, 26, 36, 38, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	47	Any one or more of 8, 15, 26, 29, 36, 52 with any one or more of 10, 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	55	10 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

Patent	Claim	Combinations	Motivation to Combine
	56	34 with any one or more of 48, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	58	Any one or more of 8, 15, 31, 48, 51, 52 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	59	32 with any one or more of 8, 15, 31, 38, 48, 51, 52, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
882	1	10 with any one or more of 22, 23, 29, 31, 34, 36; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	13	Any one or more of 10, 29 with any one or more of 8, 38, 48, 51; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	17	Any one or more of 23, 29, 32 with any one or more of 8, 15, 38, 48, 51, 52, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	18	Any one or more of 23, 29, 32 with any one or more of 8, 15, 38, 48, 51, 52, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

Patent	Claim	Combinations	Motivation to Combine
	21	Any one or more of 31, 36 with any one or more of 8, 15, 38, 48, 51, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	23	Any one or more of 22, 23, 29, 31, 36 with 15; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	24	Any one or more of 22, 23, 29, 36 with 15; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	28	Any one or more of 10, 22, 23, 31, 32, 34, 36, 38, 48, 51, 52 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	29	Any one or more of 10, 48, 52 with any one or more of 8, 29; any one or more of the preceding with any one or more of the anticipating references listed above; 38, 51 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	47	Any one or more of 22, 31, 36 with any one or more of 8, 15, 48, 51, 52, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

Patent	Claim	Combinations	Motivati n to Combine
	48	Any one or more of 23, 32 with any one or more of 8, 15, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	49	32 with any one or more of 8, 15, 65; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	50	Any one or more of 8, 15 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	54	31 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
592	1	Any one or more of 10, 22, 29, 32, 36, 38, 52 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	3	Any one or more of 22, 29, 36, 52 with 34; any one or more of the preceding with any one or more of the anticipating references listed above; 38, 65 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	4	Any one or more of 22, 29, 36, 38, 52, 65 with 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	9	Any one or more of 10, 22, 29, 36, 38, 52, 65 with 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

Patent	Claim	Combinations	Motivation to Combine
	11	Any one or more of 22, 29, 36, 38, 52, 65 with any one or more of 15, 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	13	Any one or more of 22, 29, 36, 52 with 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	18	Any one or more of 10, 38, 52, 65 with any one or more of 23, 31, 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	21	Any one or more of 29, 32 with any one or more of 8, 15, 31, 34, 48, 51; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	23	Any one or more of 10, 22, 29, 32, 36, 38, 52 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	26	Any one or more of 22, 23, 26, 29, 36, 52 with 34; any one or more of the preceding with any one or more of the anticipating references listed above; 38, 65 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

Patent	Claim	Combinations	Motivation to Combine
	27	Any one or more of 22, 23, 26, 29, 36, 38, 52, 65 with 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	30	Any one or more of 10, 22, 23, 26, 29, 36, 38, 52, 65 with 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	32	Any one or more of 22, 23, 26, 29, 36, 38, 52, 65 with any one or more of 15, 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	34	Any one or more of 22, 23, 26, 29, 36, 52 with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	39	Any one or more of 10, 26, 38, 52, 65 with any one or more of 31, 34; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.
	42	Any one or more of 23, 26, 29, 32 with any one or more of 8, 15, 31, 34, 48, 51; any one or more of the preceding with any one or more of the anticipating references listed above.	Each reference is directed to the same problem -- applying electrical energy to a target site on a patient's body structure.

UNITED STATES DISTRICT COURT

DISTRICT OF DELAWARE

ARTHROCARE CORPORATION, Plaintiff, v. SMITH & NEPHEW, INC., Defendant.	Civil Action No. 01-504 SLR

PLAINTIFF ARTHROCARE CORPORATION'S SUPPLEMENTAL OBJECTIONS AND RESPONSES TO DEFENDANT SMITH & NEPHEW'S INTERROGATORIES (NOS. 20 & 21)

Pursuant to Fed. R. Civ. P. 33 and this Court's Local Rules, ArthroCare Corporation ("ArthroCare") hereby objects and responds to defendant Smith & Nephew, Inc.'s ("Smith & Nephew's") Fourth Set of Interrogatories as follows:

GENERAL OBJECTIONS

A. ArthroCare objects to each of Smith & Nephew's interrogatories to the extent it seeks information protected by the attorney-client privilege, the work product doctrine, or any other applicable privilege or immunity from production.

B. ArthroCare objects to each of Smith & Nephew's interrogatories to the extent it seeks trade secrets or other confidential or proprietary information of ArthroCare or third parties.

C. According to Smith & Nephew's Fourth Set of Interrogatories, "the definitions and instructions in Defendant Smith & Nephew, Inc.'s First Set of Interrogatories to Plaintiff (Nos. 1-14) are incorporated herein by reference." As such, ArthroCare incorporates herein and realleges its General Objections to Defendant Smith & Nephew, Inc.'s First, Second, and Third Sets of Interrogatories to Plaintiff (Nos. 1-14, 15-16 and 17-18) as if they were set forth fully herein.

D. ArthroCare objects to each of Smith & Nephew's interrogatories to the extent it seeks to impose obligations beyond or inconsistent with those imposed by the Federal Rules of Civil Procedure, the Court's Local Rules, or orders of the Court.

E. Inadvertent disclosure of privileged information by ArthroCare shall not constitute the waiver of any applicable privilege or doctrine.

F. ArthroCare's discovery and investigation in connection with this action are continuing. As a result, ArthroCare's responses are limited to documents reviewed and information considered to date, and are given without prejudice to ArthroCare's right to amend or supplement its responses after considering additional or different documents or information obtained and reviewed through further discovery or investigation.

INTERROGATORY RESPONSES

INTERROGATORY NO. 20:

State in detail the complete factual basis for any contention that the claims of the patents-in-suit are valid, including without limitation the Identity of all persons with knowledge of such facts, and including the Identity of all documents that relate to, support, conflict with or contradict the validity of the claims of the patents-in-suit.

RESPONSE TO INTERROGATORY NO. 20:

In addition to its General Objections, ArthroCare objects to this interrogatory on the grounds that Smith & Nephew has failed to set forth in detail the bases for its contentions that the patents-in-suit are invalid, despite being given additional time by the Court to supplement its contentions and despite the fact that ArthroCare served detailed infringement claim charts identifying not only where every limitation of the patents-in-suit can be found in the accused devices, but also identifying exemplary documents supporting those contentions. The deficiencies in Smith & Nephew's supplemental responses include, among other things, the failure to identify where any of the limitations of the patents-in-suit can be found among any one of the 73 references Smith & Nephew cites, the failure to explain how and why a person skilled in the art would have been motivated to combine any specific reference with any other specific reference, and the failure to state any basis for its claims that the patents-in-suit are invalid for indefiniteness or incorrect inventorship. ArthroCare further objects that this interrogatory is premature because the Court allowed ArthroCare until two weeks after Smith & Nephew served its supplemental contention responses to provide ArthroCare's supplemental responses on issues for which ArthroCare does not bear the burden of proof.

SUPPLEMENTAL RESPONSE TO INTERROGATORY NO. 20:

Please see Exhibit A.

INTERROGATORY NO. 21:

If you contend that Smith & Nephew's contentions concerning invalidity of the patents-in-suit are incorrect in any way, state in detail the complete factual basis for your contention and Identify all individuals with knowledge of facts relating to your contention and Identify all documents and things relating to your contention.

RESPONSE TO INTERROGATORY NO. 21:

In addition to its General Objections, ArthroCare objects to this interrogatory on the grounds that Smith & Nephew has failed to set forth in detail the bases for its contentions that the patents-in-suit are invalid, despite being given additional time by the Court to supplement its

contentions and despite the fact that ArthroCare served detailed infringement claim charts identifying not only where every limitation of the patents-in-suit can be found in the accused devices, but also identifying exemplary documents supporting those contentions. The deficiencies in Smith & Nephew's supplemental responses include, among other things, the failure to identify where any of the limitations of the patents-in-suit can be found among any one of the 73 references Smith & Nephew cites, the failure to explain how and why a person skilled in the art would have been motivated to combine any specific reference with any other specific reference, and the failure to state any basis for its claims that the patents-in-suit are invalid for indefiniteness or incorrect inventorship. ArthroCare further objects that this interrogatory is premature because the Court allowed ArthroCare until two weeks after Smith & Nephew served its supplemental contention responses to provide ArthroCare's supplemental responses on issues for which ArthroCare does not bear the burden of proof.

SUPPLEMENTAL RESPONSE TO INTERROGATORY NO. 21:

Please see Exhibit A.

Dated: October 15, 2002

WEIL, GOTSHAL, & MANGES LLP

By: Perry Clark

Perry Clark
Attorneys for Plaintiff
ARTHROCARE CORPORATION

DECLARATION OF SERVICE

I am a citizen of the United States, more than 18 years old, and not a party to this action. My place of employment and business address is 201 Redwood Shores Parkway, Redwood Shores, CA 94065. On October 14, 2002, I caused a copy of **PLAINTIFF ARTHROCARE CORPORATION'S SUPPLEMENTAL OBJECTIONS AND RESPONSES TO DEFENDANT SMITH & NEPHEW'S INTERROGATORIES (NOS. 20 & 21)** to be served on DEFENDANT Smith & Nephew, Inc. as follows:

[ ] **BY MAIL** I am readily familiar with the business practice at my place of business for collection and processing of correspondence for mailing with the United States Postal Service. Correspondence so collected and processed is deposited with the United States Postal Service. Correspondence so collected and processed is deposited with the United States Postal Service that same day in the ordinary course of business. The above document was placed in a sealed envelope with first-class postage thereon fully prepaid, and placed for collection and mailing on that date following ordinary business practice.

[X] **BY FACSIMILE** The facsimile machine used to serve the above document on said party or parties produced a record showing that the facsimile transmission was completed successfully.

[ ] **BY OVERNIGHT COURIER SERVICE** I am readily familiar with the business practice at my place of business for collection and processing of correspondence for deposit with an overnight delivery service. Correspondence placed for collection and processing is either delivered to a courier or driver authorized by said overnight delivery service to receive documents or deposited by an employee or agent of this firm in a box or other facility regularly maintained by said overnight delivery service that same day in the ordinary course of business.

[ ] **BY HAND DELIVERY** I caused said documents to be hand delivered to the parties designated below by delivering said copies thereof to a person over the age of eighteen (18) years and not a party to this action.

Executed on October 14, 2002 at Redwood Shores, California. I declare under penalty of perjury that the foregoing is true and correct.

S. Lai
____

DECLARATION OF SERVICE

I am a citizen of the United States, more than 18 years old, and not a party to this action. My place of employment and business address is 201 Redwood Shores Parkway, Redwood Shores, California, 94065-1175. On October 15, 2002, I caused a copy of **PLAINTIFF ARTHROCARE CORPORATION'S SUPPLEMENTAL OBJECTIONS AND RESPONSES TO DEFENDANT SMITH & NEPHEW'S INTERROGATORIES (NOS. 20 & 21)** to be served on DEFENDANT Smith & Nephew, Inc. as follows:

[X] BY MAIL I am readily familiar with the business practice at my place of business for collection and processing of correspondence for mailing with the United States Postal Service. In the ordinary course of business, correspondence so collected and processed is deposited with the United States Postal Service that same day with first-class postage thereon fully prepaid. On the above-referenced date, I placed the above document(s) in a sealed envelope addressed to the person(s) identified below and placed the envelope for collection and mailing following ordinary business practice.

[ ] BY FACSIMILE I am readily familiar with the business practice at my place of business for collection and processing of documents for transmission by facsimile. In the ordinary course of business, documents are collected and transmitted by facsimile using a facsimile machine that produces a record showing whether the facsimile transmission was completed successfully. On the above-referenced date, I delivered the above document(s) to the persons responsible for transmitting documents by facsimile following ordinary business practice. I have attached to the original papers being filed with the Court a copy of the transmission report confirming that transmission was successful. [Note: declaration to be executed only after receipt and attachment of transmission report]

[ ] BY OVERNIGHT COURIER SERVICE I am readily familiar with the business practice at my place of business for collection and processing of correspondence for deposit with an overnight delivery service. Correspondence placed for collection and processing

is either delivered to a courier or driver authorized by said overnight delivery service to receive documents or deposited by an employee or agent of this firm in a box or other facility regularly maintained by said overnight delivery service that same day in the ordinary course of business. On the above-referenced date, I sealed the above document(s) in an envelope or package designated by the courier service and addressed to the person(s) identified below, with payment of next day delivery fees provided for, and delivered the envelope/package to the office personnel responsible for delivering documents to overnight courier services following ordinary business practice.

Keith Walter
William Marsden
Fish & Richardson P.C.
919 North Market Street, Suite 1100
P.O. Box 1114
Wilmington, DE 19899-1114

Kurtis MacFerrin
FISH & RICHARDSON P.C.
500 Arguello Street
Suite 500
Redwood City, CA 94063-1526

Mark J. Hebert
Fish & Richardson P.C.
225 Franklin Street
Boston, Massachusetts 02110-2804

Executed on October 15, 2002 at Redwood Shores, California. I declare under penalty of perjury that the foregoing is true and correct.

Carolanna Lance-White
Carolanna Lance-White

Exhibit A

ArthroCare's Preliminary Validity Contentions
***ArthroCare v. Smith & Nephew*, 01-0504 SLR**

I. Anticipation

References 8 and 15[1]: Neither U.S. Patent No. 4,166,198 to Roos (the "Roos '198 Patent"), which was disclosed during the prosecution of the '592 patent-in-suit, nor the article by E. Elsasser and E. Roos entitled "Concerning an Instrument for Transurethral Resection Without Leakage of Current" (the "Roos Article"), discloses or renders obvious any of the claimed inventions. The Roos '198 Patent and the Roos Article describe the same devices, which are designed to cut tissue during transurethral resection procedures.

The Roos '198 Patent never describes the use of "electrically conductive fluid" during electrosurgery. The Roos '198 Patent only discloses the use of an unspecified "washing liquid" that flows through the endoscope that houses the treatment and neutral electrodes. See Roos '198 Patent at 4:51-57, Fig. 1. The Roos '198 Patent does not state that the "washing liquid" that is supplied to the region of the surgical site is electrically conductive fluid. This omission is significant, because numerous non-conductive washing liquids, such as distilled water, glycine, sorbitol, and the like, have been used in electrosurgery and are still in use today. See, e.g., U.S. Patent No. 4,936,301 to Rexroth, et al. at 1:62-64 and 2:4-7.

In fact, the Roos '198 specification makes clear that the "washing liquid" delivered to the surgical site in the Roos '198 Patent is not electrically conductive. The Roos '198 Patent states at column 6, lines 51-53 that "the neutral electrode 11 in the form

[1] "Reference __" refers to the reference number set forth in Smith & Nephew's October 9, 2002 invalidity contentions.

of a steel band rests on the tissue in large area form, so that good electrical contact is ensured." If the "washing liquid" were electrically conductive, there would be no need for the neutral electrode to rest on the tissue in large area form to ensure good electrical contact: electrical contact between the neutral electrode and the cutting electrode would be ensured by the "washing liquid" itself. The statement in the Roos '198 Patent that tissue contact with the neutral electrode is needed to ensure electrical contact plainly shows that the "washing liquid" described in the Roos '198 Patent could not have been electrically conductive.

A later-issued patent to the same named inventor, U.S. Patent No. 4,706,667 ("the Roos '667 Patent") to Roos, demonstrates unequivocally that the "washing liquid" disclosed in the Roos '198 Patent was not electrically conductive. The Roos '198 Patent claims priority to German Patent Application No. 2521719 ("German Patent Application"). The Roos '667 Patent explains at column 1 lines 14-29 that the device described in the German Patent Application (and thus in the Roos '198 Patent) did not work to cut tissue because the medium in contact with the electrodes was not electrically conductive:

> In a known electro-surgical high frequency cutting instrument of this kind (DE-OS No. 25 21 719) the neutral electrode is admittedly arranged in the immediate vicinity of the cutting electrode, it is however so separated from the tissue by a plastic cover, or by its arrangement in an endoscope, that it can only enter into electrical contact with the cutting electrode electrolytically via the secretion which is present during the cutting process. As a result, it is difficult to maintain the current intensity required for trouble free cutting in a required precisely defined manner at the cutting electrode. Thus, if the power setting at the r.f. generator is too high, burns can result or, if the power setting is too low, then a poor cut or indeed injury occurs because the tissue to be cut sticks to the cutting electrode as a result of coagulation processes.

According to the Roos '667 Patent, the device disclosed in the parent application to the Roos '198 Patent (and thus in the Roos '198 Patent itself) did not work because there was insufficient electrical contact between the neutral and cutting electrodes to cut tissue, even though the electrodes were in the "immediate vicinity" of one another. If the Roos '198 Patent had delivered electrically conducting fluid to the tissue site, such as isotonic saline, then the Roos '667 Patent surely would not have stated, as it did, that the cutting and neutral electrodes "only enter into electrical contact" with each other "via the secretion which is present during the cutting process." If Roos '198 had delivered electrically conducting fluid to the tissue site, there would have been an electrical connection between the cutting and neutral electrodes by virtue of the electrically conducting fluid itself, regardless of whether bodily secretions were present. Plainly, Roos '198 used non-conducting "washing liquid" and attempted to rely on bodily secretions from the cutting process to make the non-conductive "washing liquid" more conductive. According to the Roos '667 Patent, these secretions did not make the non-conductive "washing liquid" electrically conductive.

Significantly, the Roos '667 Patent did not solve the electrical contact problem described in the Roos '198 Patent by introducing electrically conducting fluid to the tissue site. Rather, the Roos '667 Patent solved the problem of poor conductivity by disclosing a device in which <u>both</u> the cutting and neutral electrodes were in physical contact with the tissue so that current could flow from the cutting electrode, through the tissue, and to a return electrode, not through electrically conducting fluid:

> The instrument is first of all placed in accordance with FIG. 1 onto the tissue 16 which is to be separated by means of a cut, with a concave ring-like contact surface 14 being formed between the tissue 16 and the neutral electrode 11 and with a very small funnel-like contact surface 15 being

> formed between the tip of the cutting electrode 12 and the tissue 16. If the r.f. generator is now switched on then an r.f. current indicated by the current lines 28 flows between the cutting electrode 12 and the neutral electrode 11.

Because the Roos '198 Patent does not disclose or enable operation in an electrically conductive fluid, it cannot anticipate or render obvious claims containing that limitation.

Neither the Roos Article nor the Roos '198 Patent discloses an insulating member circumscribing a return electrode, and Smith & Nephew does not contend that they do. Moreover, neither reference discloses that the frequency applied between a return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz, and Smith & Nephew does not contend that they do. In addition, neither reference discloses that the voltage applied between the electrode terminal and a return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS), and Smith & Nephew does not contend that they do.

Neither the Roos Article nor the Roos '198 Patent discloses a high frequency voltage sufficient to vaporize the fluid over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer. Moreover, neither reference discloses that at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum. In addition, neither reference discloses that the voltage applied is at least 200 volts peak to peak or that it is in the range from about 500 to 1400 volts peak to peak, and Smith & Nephew does not contend that they do. Neither reference discloses that the distance between the proximal portion of the electrode terminal and most distal portion of a return electrode is in the range from about 0.5 to 10 mm, and Smith & Nephew does not contend that they

do. Moreover, neither reference discloses that the liquid phase of the fluid has a conductivity greater than 2 mS/cm nor that the fluid comprises isotonic saline.

Neither the Roos Article nor the Roos '198 Patent discloses ablation of tissue. In addition, neither reference discloses vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal. Moreover, neither reference discloses the discharge of photons to the target site in contact with a vapor layer, and Smith & Nephew does not contend that they do. Neither reference discloses that the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2, and Smith & Nephew does not contend that they do. In addition, neither reference discloses that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site, and Smith & Nephew does not contend that they do. Moreover, neither reference discloses evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal, and Smith & Nephew does not contend that they do.

Neither the Roos Article nor the Roos '198 Patent discloses that an electrically conductive fluid completes the conduction path between the electrode terminal and a return electrode. In addition, neither reference discloses that an electrical current flows from the active electrode, through the electrically conductive fluid, and to a return electrode.

Reference 10: U.S. Patent 3,970,088 to Morrison ("Morrison '088 Patent") does not disclose or render obvious any of the claimed inventions. There is no teaching or suggestion in the Morrison '088 Patent that electrically conductive fluid creates a current flow path between the two electrodes, and Smith & Nephew does not

contend that it does. To the contrary, the Morrison '088 Patent teaches away from such a path, because it states that both electrodes are brought into contact with the tissue to be treated and that current flows through the tissue between the electrodes, as opposed to through an electrically conductive fluid, or that there is an arc across a gap between the active electrode and the tissue (column 6 lines 29-34, column 7 lines 59-62, and column 9 lines 1-3). The Morrison '088 Patent also teaches that both of the electrodes are designed to have a tissue a effect, and as such this reference does not disclose a return electrode (column 9 lines 33-36, column 10 lines 41-46).

The Morrison '088 Patent does not disclose that the frequency applied between a return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz, and Smith & Nephew does not contend that it does. The Morrison '088 Patent does not disclose that a return electrode is spaced from the electrode terminal to minimize contact between a return electrode and the patient's tissue because a return electrode is designed to be in contact with the tissue. In addition, the Morrison '088 Patent does not disclose that the voltage applied between the electrode terminal and a return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS), and Smith & Nephew does not contend that it does. Smith & Nephew also does not contend that this reference discloses a device for use on a target site selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.

The Morrison '088 Patent does not disclose a high frequency voltage sufficient to vaporize the fluid over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.

Moreover, the Morrison '088 Patent does not disclose that at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum. In addition, the Morrison '088 Patent does not disclose that the voltage applied is at least 200 volts peak to peak or that it is in the range from about 500 to 1400 volts peak to peak, and Smith & Nephew does not contend that it does. The Morrison '088 Patent does not disclose that the distance between the proximal portion of the electrode terminal and the most distal portion of a return electrode is in the range from about 0.5 to 10 mm, and Smith & Nephew does not contend that it does. Moreover, the Morrison '088 Patent does not disclose that the liquid phase of the fluid has a conductivity greater than 2 mS/cm nor that the fluid comprises isotonic saline, and Smith & Nephew does not contend that it does.

The Morrison '088 Patent does not disclose ablation of tissue, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal. Moreover, this reference does not disclose the discharge of photons to the target site in contact with a vapor layer. The Morrison '088 Patent does not disclose that the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site, and Smith & Nephew does not contend that it does. Moreover, the Morrison '088 Patent does not disclose evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal, and Smith & Nephew does not contend that it does.

The Morrison '088 Patent does not disclose, as discussed above, a return electrode that is not in contact with the body structure, and Smith & Nephew does not contend that it does. The Morrison '088 Patent also does not disclose that an active electrode, return electrode, target site, and tissue structure are immersed in electrically conducting fluid, and Smith & Nephew does not contend that it does. The Morrison '088 Patent also does not disclose delivering electrically conductive fluid to the target site, and Smith & Nephew does not contend that it does. The Morrison '088 Patent also does not disclose that an electrically conductive fluid completes the conduction path between the electrode terminal and a return electrode, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose that an electrical current flows from the active electrode, through the electrically conductive fluid, and to a return electrode.

Reference 22: U.S. Patent No. 4,326,529 to Doss et al. ("Doss '529 Patent"), which was cited to the Examiner during the prosecution of the patents-in-suit, does not disclose or render obvious any of the claimed inventions. Doss '529 describes a monopolar device for heating the corneal stroma, a portion of the cornea that is located below the surface of the cornea (column 2, lines 28-35, column 3, lines 58-62). The device described in Doss '529 Patent uses a high pressure flow of saline to keep the corneal surface cool during treatment. The Doss '529 device uses what it describes as a "circulating saline electrode," in which circulating saline confined within a tube forms an integral portion of the active electrode (column 4, line 41, column 5, lines 54-60, Figs. 2-5). The current flows from the circulating saline electrode through the patient's body to reach a return electrode, which is placed on the back of the patient's head or neck. Nothing in Doss '529 suggests placing a return electrode in contact with electrically

conducting fluid or using electrically conducting fluid to generate a current flow path between the active and return electrodes of the device.

The Doss '529 Patent does not disclose that a return electrode forms a portion of the shaft of the electrosurgical probe, and Smith & Nephew does not contend that it does. The Doss '529 Patent also does not disclose an insulating member circumscribing a return electrode nor a return electrode spaced from the electrode terminal to minimize direct contact between a return electrode and the patient's tissue, and Smith & Nephew does not contend that it does. Smith & Nephew also does not contend that this reference discloses a device for use on a target site selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body. In addition, the Doss '529 Patent does not disclose that the frequency applied between a return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz, and Smith & Nephew does not contend that it does.

The Doss '529 Patent does not disclose a high frequency voltage sufficient to vaporize the fluid over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer, and Smith & Nephew does not contend that it does. Moreover, the Doss '529 Patent does not disclose that at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum, and Smith & Nephew does not contend that it does. In addition, the Doss '529 Patent does not disclose that the voltage applied is at least 200 volts peak to peak or that it is in the range from about 500 to 1400 volts peak to peak, and Smith & Nephew does not contend that it does. The Doss '529 Patent does not disclose

that the distance between the proximal portion of the electrode terminal and most distal portion of a return electrode is in the range from about 0.5 to 10 mm, and Smith & Nephew does not contend that it does.

The Doss '529 Patent does not disclose ablation of tissue, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal, and Smith & Nephew does not contend that it does. Moreover, this reference does not disclose the discharge of photons to the target site in contact with a vapor layer, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site, and Smith & Nephew does not contend that it does. Moreover, the Doss '529 Patent does not disclose evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal, and Smith & Nephew does not contend that it does.

The Doss '529 Patent does not disclose, as discussed above, a return electrode that is not in contact with the body structure, and Smith & Nephew does not contend that it does. The Doss '529 Patent also does not disclose that a return electrode is positioned within electrically conducting fluid. The Doss '529 Patent also does not disclose that an electrically conductive fluid completes the conduction path between the electrode terminal and a return electrode, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose that an electrical current flows from the active electrode, through the electrically conductive fluid, and to a return electrode.

Reference 23: U.S. Patent No. 4,381,007 to Doss ("Doss '007 Patent"), which was cited to the Examiner during the prosecution of the patents-in-suit, does not disclose or render obvious any of the claimed inventions. Doss '007 Patent describes a device for heating corneal stroma using biactive or quadrapole electrodes and saline flow to cool the corneal surface. The biactive devices have two tubular electrodes, arranged adjacent to each other or concentrically (column 4, lines 28-29, column 5, lines 27-31, Figs. 1, 2, 7, 8). The quadrapole electrode is composed of three separate electrodes, with the center electrode counting as two poles because it carries twice as much current as the other two (column 5, lines 19-24, Figs. 5, 6). Neither the biactive nor the quadrapole device has a return electrode as recited in the asserted claims of the patents-in-suit. The absence of a "return" electrode is important to the function of the devices claimed in the Doss '007 Patent because those devices are intended to generate a tissue effect between the electrodes deep in the tissue rather than at one electrode or the other.

The Doss '007 Patent does not disclose a return electrode spaced from the electrode terminal to minimize direct contact between a return electrode and the patient's tissue. Smith & Nephew also does not contend that this reference discloses a device for use on a target site selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.

The Doss '007 Patent does not disclose a high frequency voltage sufficient to vaporize the fluid over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer, and Smith & Nephew does not contend that it does. Moreover, the Doss '007 Patent does not disclose

that at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum, and Smith & Nephew does not contend that it does. In addition, the Doss '007 Patent does not disclose that the voltage applied is in the range from about 500 to 1400 volts peak to peak. The Doss '007 Patent does not disclose that the distance between the proximal portion of the electrode terminal and most distal portion of a return electrode is in the range from about 0.5 to 10 mm, and Smith & Nephew does not contend that it does.

The Doss '007 Patent does not disclose ablation of tissue, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal, and Smith & Nephew does not contend that it does. Moreover, this reference does not disclose the discharge of photons to the target site in contact with a vapor layer, and Smith & Nephew does not contend that it does. The Doss '007 Patent also does not disclose that the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site, and Smith & Nephew does not contend that it does. Moreover, the Doss '007 Patent does not disclose evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal, and Smith & Nephew does not contend that it does.

References 26 & 29: The two articles by Slager et al., entitled "Vaporization of Atherosclerotic Plaques By Spark Erosion" ("Slager et al. 1985") and "Spark Erosion Of Arteriosclerotic Plaques" ("Slager et al. 1987"), do not disclose or

render obvious any of the claimed inventions. The active and return electrodes of the device are placed in contact with the tissue. Slager et al. 1985 at page 1387; Slager et al. 1987 at page 68, 71. The current flows from the active electrode, through the tissue and to a return electrode, and as such, neither reference discloses a current flow path between the active and return electrode through an electrically conducting fluid. In addition, neither reference discloses delivering electrically conducting fluid to a target site on a patient's body.

Neither of these references discloses that a return electrode forms a portion of the shaft of the electrosurgical probe nor that there is an insulating member circumscribing a return electrode. Neither reference discloses a return electrode that is spaced from the electrode terminal to minimize contact between a return electrode and the patient's tissue.

Neither reference disclose that the distance between the proximal portion of the electrode terminal and most distal portion of a return electrode is in the range from about 0.5 to 10 mm.

In addition, these references do not disclose the discharge of photons to the target site in contact with a vapor layer. In addition, neither reference discloses that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site. Moreover, neither reference discloses evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal, and Smith & Nephew does not contend that it does.

Reference 31: U.S. Patent No. 4,674,499 to Pao, which was disclosed during the prosecution of the patents-in-suit, neither discloses nor renders obvious any of

the asserted claims of the ArthroCare patents-in-suit. There is no teaching or suggestion in the Pao '499 Patent that electrically conductive fluid creates a current flow path between the two electrodes. To the contrary, the Pao '499 Patent teaches away from such a path, because it states that both electrodes are brought into contact with the tissue to be treated and that current flows through the tissue between the electrodes -- not through electrically conductive fluid (column 3 lines 11-15 and column 9 lines 58-63). The Pao '499 Patent does not teach that fluid is used for current conduction, but instead for the different purposes of removing blood, other fluid, and debris from the surgical site (column 3 lines 2-10 and column 8 line 66 to column 9 line 2). The Pao '499 Patent also does not disclose a return electrode which is designed to reduce tissue effect because both electrodes are designed to cause a tissue effect in a region between the two electrodes.

The Pao '499 Patent does not disclose that the frequency applied between a return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz, and Smith & Nephew does not contend that it does. The Pao '499 Patent does not disclose that a return electrode is spaced from the electrode terminal to minimize contact between a return electrode and the patient's tissue because a return electrode is designed to be in contact with the tissue. In addition, the Pao '499 Patent does not disclose that the voltage applied between the electrode terminal and a return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS), and Smith & Nephew does not contend that it does.

The Pao '499 Patent does not disclose a high frequency voltage sufficient to vaporize the fluid over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer. Moreover, the Pao '499 Patent does not disclose that at least a portion of the energy induced is in the form of

photons having a wavelength in the ultraviolet spectrum. In addition, the Pao '499 Patent does not disclose that the voltage applied is at least 200 volts peak to peak or that it is in the range from about 500 to 1400 volts peak to peak, and Smith & Nephew does not contend that it does. The Pao '499 Patent does not disclose that the distance between the proximal portion of the electrode terminal and most distal portion of a return electrode is in the range from about 0.5 to 10 mm. Moreover, the Pao '499 Patent does not disclose that the liquid phase of the fluid has a conductivity greater than 2 mS/cm.

The Pao '499 Patent does not disclose ablation of tissue, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal. Moreover, this reference does not disclose the discharge of photons to the target site in contact with a vapor layer. In addition, this reference does not disclose that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site, and Smith & Nephew does not contend that it does.

The Pao '499 Patent does not disclose, as discussed above, a return electrode that is not in contact with the body structure, and Smith & Nephew does not contend that it does. The Pao '499 Patent also does not disclose that an active electrode, return electrode, target site, and tissue structure are immersed in electrically conducting fluid, and Smith & Nephew does not contend that it does. The Pao '499 Patent also does not disclose an electrically conductive fluid that completes the conduction path between the electrode terminal and a return electrode, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose that an electrical current flows from the active electrode, through the electrically conductive fluid, and to a return electrode.

Reference 32: The Valleylab, Inc., "Surgistat Service Manual," does not disclose or render obvious any of the claimed inventions. The Surgistat Service manual only discloses a monopolar system with a patient plate. Smith & Nephew concedes that this reference discloses none of the limitations of the asserted claims of the '536 patent, except a voltage range from 10 volts (RMS) to 1000 volts (RMS). Smith & Nephew also concedes that this reference discloses none of the limitations of the asserted claims of the '882 patent, except a minimum voltage of 200 volts peak to peak and a range from 500 to 1400 volts peak to peak. Smith & Nephew concedes that this reference discloses none of the limitations of the asserted claims of the '592 patent, except a range from 500 to 1400 volts peak to peak.

Reference 34: The article entitled "Radio Frequency and Impedance Feedback" by Paul C. Nardella, which was disclosed during the prosecution of the patents-in-suit, does not disclose or render obvious any of the claimed inventions. As can be seen in Figure 2, and as described on pages 42 and 43, all of the electrical current passes through the tissue before it travels to a return electrode. In addition, the Nardella article states that the active electrode is in contact with the tissue to be treated on pages 42 and 43. The Nardella article also does not disclose directing electrically conductive fluid to the target site. As such, the Nardella article does not disclose that current flows from the active electrode through the electrically conducting fluid to a return electrode. In addition, the Nardella article does not disclose that the voltage applied between the electrode terminal and a return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS), and Smith & Nephew does not contend that it does.

The Nardella article does not disclose a high frequency voltage sufficient to vaporize the fluid over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer. Moreover, the Nardella article does not disclose that at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum. In addition, the Nardella article does not disclose that the voltage applied is at least 200 volts peak to peak or that it is in the range from about 500 to 1400 volts peak to peak, and Smith & Nephew does not contend that it does. The Nardella article does not disclose that the distance between the proximal portion of the electrode terminal and most distal portion of a return electrode is in the range from about 0.5 to 10 mm, and Smith & Nephew does not contend that it does. Moreover, the Nardella article does not disclose that the liquid phase of the fluid has a conductivity greater than 2 mS/cm nor that the fluid comprises isotonic saline, and Smith & Nephew does not contend that it does.

The Nardella article does not disclose ablation of tissue, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal. Moreover, this reference does not disclose the discharge of photons to the target site in contact with a vapor layer. The Nardella article does not disclose that the electrode terminal has a contact surface area in the range of about $0.25\ mm^2$ to $50\ mm^2$, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site, and Smith & Nephew does not contend that it does. Moreover, the Nardella article does not disclose evacuating fluid generated at the target site with a

suction lumen having a distal end adjacent the electrode terminal, and Smith & Nephew does not contend that it does.

The Nardella article does not disclose delivering an electrically conductive fluid to the target site, and Smith & Nephew does not contend that it does. The Nardella article also does not disclose that an electrically conductive fluid completes the conduction path between the electrode terminal and a return electrode, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose that an electrical current flows from the active electrode, through the electrically conductive fluid, and to a return electrode.

Reference 36: U.S. Patent No. 4,805,616 to Pao neither discloses nor renders obvious any of the asserted claims of the ArthroCare patents-in-suit. The Pao '616 Patent describes a bipolar probe that is very different than the inventions claimed in the '536, '882, and '592 patents. There is no teaching or suggestion in the Pao '616 Patent that electrically conductive fluid creates a current flow path between the two electrodes. To the contrary, the Pao '616 Patent teaches away from such a path, because it states that both electrodes are brought into contact with the tissue to be treated and that current flows through the tissue between the electrodes -- not through electrically conductive fluid (column 7 lines 33-37). The Pao '616 Patent does not teach that fluid is used for current conduction, but instead for the different purposes of removing blood, other fluid, and debris from the surgical site (see Pao '499 Patent, incorporated by reference, column 3 lines 2-10 and column 8 line 66 to column 9 line 2).

The Pao '616 Patent does not disclose that a return electrode forms a portion of the shaft of the electrosurgical probe, and Smith & Nephew does not contend

that it does. The Pao '616 Patent also does not disclose a return electrode being sufficiently spaced from the electrode terminal to minimize direct contact between a return electrode and the patient's tissue. Moreover, the Pao '616 Patent does not disclose that the frequency applied between a return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz, and Smith & Nephew does not contend that it does. The Pao '616 Patent does not disclose that a return electrode is spaced from the electrode terminal to minimize contact between a return electrode and the patient's tissue because a return electrode is designed to be in contact with the tissue. In addition, the Pao '616 Patent does not disclose that the voltage applied between the electrode terminal and a return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS), and Smith & Nephew does not contend that it does.

The Pao '616 Patent does not disclose a high frequency voltage sufficient to vaporize the fluid over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer. Moreover, the Pao '616 Patent does not disclose that at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum. In addition, the Pao '616 Patent does not disclose that the voltage applied is at least 200 volts peak to peak or that it is in the range from about 500 to 1400 volts peak to peak, and Smith & Nephew does not contend that it does.

The Pao '616 Patent does not disclose ablation of tissue, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal. Moreover, this reference does not disclose the discharge of photons

to the target site in contact with a vapor layer. The Pao '616 Patent does not disclose that the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2. In addition, this reference does not disclose that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site, and Smith & Nephew does not contend that it does. Moreover, the Pao '616 Patent does not disclose evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal, and Smith & Nephew does not contend that it does.

The Pao '616 Patent does not disclose, as discussed above, a return electrode that is not in contact with the body structure, and Smith & Nephew does not contend that it does. The Pao '616 Patent also does not disclose that an active electrode, return electrode, target site, and tissue structure are immersed in electrically conducting fluid. The Pao '616 Patent also does not disclose delivering the electrically conductive fluid to the target site. The Pao '616 Patent also does not disclose an electrically conductive fluid that completes the conduction path between the electrode terminal and a return electrode, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose that an electrical current flows from the active electrode, through the electrically conductive fluid, and to a return electrode.

Reference 38: The article entitled "Thermal Compression and Molding Atherosclerotic Vascular Tissue With Use of Radiofrequency Energy: Implications for Radiofrequency Balloon Angioplasty," by Benjamin Lee, et al., does not disclose or render obvious any of the claimed inventions. Among other things, the Lee article does not disclose a return electrode and instead discloses the use of a "copper electrode plate" (see page 1168). The Lee article also teaches that all of the electrical current passes

through the tissue and does not disclose that an electrically conductive fluid completes a current flow path between an active electrode and a return electrode (page 1168).

The Lee article does not disclose that a return electrode forms a portion of the shaft of the electrosurgical probe, and Smith & Nephew does not contend that it does. The Lee article also does not disclose an insulating member circumscribing a return electrode. In addition, the Lee article does not disclose that the frequency applied between a return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz, and Smith & Nephew does not contend that it does. The Lee article does not disclose that a return electrode is spaced from the electrode terminal to minimize contact between a return electrode and the patient's tissue. In addition, the Lee article does not disclose that the voltage applied between the electrode terminal and a return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS), and Smith & Nephew does not contend that it does.

The Lee article does not disclose a high frequency voltage sufficient to vaporize the fluid over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer. Moreover, the Lee article does not disclose that at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum. In addition, the Lee article does not disclose that the voltage applied is at least 200 volts peak to peak or that it is in the range from about 500 to 1400 volts peak to peak, and Smith & Nephew does not contend that it does. The Lee article does not disclose that the distance between the proximal portion of the electrode terminal and most distal portion of a return electrode is in the range from about 0.5 to 10 mm, and Smith & Nephew does not contend that it does.

The Lee article does not disclose ablation of tissue, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal. Moreover, this reference does not disclose the discharge of photons to the target site in contact with a vapor layer. In addition, this reference does not disclose that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site, and Smith & Nephew does not contend that it does. Moreover, the Lee article does not disclose evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal, and Smith & Nephew does not contend that it does.

The Lee article does not disclose, as discussed above, a return electrode that is not in contact with the body structure, and as such does not disclose positioning a return electrode within the volume of electrically conductive fluid to generate the current flow path between the electrode terminal and a return electrode. The Lee article also does not disclose that an active electrode, return electrode, target site, and tissue structure are immersed in electrically conducting fluid. The Lee article also does not disclose an electrically conductive fluid that completes the conduction path between the electrode terminal and a return electrode, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose that an electrical current flows from the active electrode, through the electrically conductive fluid, and to a return electrode.

Reference 48: U.S. Patent No. 4,976,711 to Parins, et al., does not disclose or render obvious any of the claimed inventions. Parins '711 Patent discloses a catheter for removing stenotic lesions from seriously blocked blood vessels. Parins '711 Patent does not disclose a return electrode but instead two active electrodes that are put in

contact with the tissue. This reference also does not disclose the use of electrically conductive fluid to complete a current flow path between an active and return, and instead teaches that an arc is formed when the active and return electrode "are pushed up against the lesion" (column 4 lines 33-38, column 5 lines 24-26, 6 lines 20-25, column 7 lines 8-11). As such, the Parins '711 Patent does not disclose a return electrode which is designed to reduce tissue effect. Although Parins discusses a "flush lumen," Parins discloses the use of a saline solution only for "flushing or aspirating the wound site" and not for conducting electrical current (column 6 lines 26-27, column 7 lines 15-18).

The Parins '711 Patent does not disclose that the frequency applied between a return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz, and Smith & Nephew does not contend that it does. The Parins '711 Patent does not disclose that a return electrode is spaced from the electrode terminal to minimize contact between a return electrode and the patient's tissue because a return electrode is designed to be in contact with the tissue. In addition, the Parins '711 Patent does not disclose that the voltage applied between the electrode terminal and a return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS), and Smith & Nephew does not contend that it does. Smith & Nephew also does not contend that this reference discloses a device for use on a target site selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.

The Parins '711 Patent does not disclose a high frequency voltage sufficient to vaporize the fluid over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer.

Moreover, the Parins '711 Patent does not disclose that at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum. In addition, the Parins '711 Patent does not disclose that the voltage applied is at least 200 volts peak to peak or that it is in the range from about 500 to 1400 volts peak to peak, and Smith & Nephew does not contend that it does. The Parins '711 Patent does not disclose that the distance between the proximal portion of the electrode terminal and most distal portion of a return electrode is in the range from about 0.5 to 10 mm, and Smith & Nephew does not contend that it does.

In addition, this reference does not disclose vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal. Moreover, this reference does not disclose the discharge of photons to the target site in contact with a vapor layer. The Parins '711 Patent does not disclose that the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2, and Smith & Nephew does not contend that it does. In addition, this reference does not disclose that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site, and Smith & Nephew does not contend that it does.

The Parins '711 Patent does not disclose, as discussed above, a return electrode that is not in contact with the body structure. The Parins '711 Patent also does not disclose that an active electrode, return electrode, target site, and tissue structure are immersed in electrically conducting fluid. The Parins '711 Patent also does not disclose an electrically conductive fluid that completes the conduction path between the electrode terminal and a return electrode. In addition, this reference does not disclose that an

electrical current flows from the active electrode, through the electrically conductive fluid, and to a return electrode.

Reference 51: U.S. Patent No. 5,007,908 to Rydell, which was disclosed during the prosecution of the '592 patent-in-suit, does not disclose or render obvious any of the claimed inventions. Rydell '908 depicts a bipolar surgical instrument for use in performing surgery in the gastrointestinal tract (column 1 lines 9-12). Each of the electrodes of the Rydell '908 device is brought into contact with the tissue to be treated (column 1 line 63 to column 2 line 2). Rydell '908 also describes that one may introduce saline or other suitable solution to flush away blood, body fluids, and other debris to improve viewing of the surgical site (column 3 lines 53-57).

The Rydell '908 patent never states that electrically conducting fluid creates a current flow path between the electrodes. To the contrary, the Rydell '908 patent teaches that the purpose of the fluid is to wash the surgical site free of blood, other body fluids, and debris. It also teaches that both electrodes are in contact with the tissue, which suggests that the current flow path is through the tissue, as is customary in conventional bipolar electrosurgery, rather than through the electrically conducting fluid.

The Rydell '908 patent emphasizes that the active electrode and a return electrode are placed in contact with the tissue, and as such it does not disclose that the electrically conducting fluid generates a current flow path between a return electrode and the electrode terminal. In addition, Rydell '908 does not disclose that a return electrode is spaced away from the tissue. Moreover, because the function of the fluid is to flush the region free of blood, body fluids, and other debris, there is no assurance that the active or return electrodes operate in the presence of electrically conducting fluid, because the

fluid may disperse from the area after flushing. This is different than, for example, arthroscopic surgery, in which the fluid is used to distend the joint and the tissue is thus always submerged under water. The Rydell '908 Patent also does not disclose that the voltage applied between a return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz. In addition, the Rydell '908 Patent does not disclose that the voltage applied between the electrode terminal and a return electrode is in the range from about 10 volts (RMS) to 1000 volts (RMS).

Rydell '908 patent does not disclose the voltage sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal, or the discharge of energy to the target site. The Rydell '908 patent also does not disclose that at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum, and Smith & Nephew does not contend that it does. The Rydell '908 patent does not disclose the voltage at which the device operates, and certainly does not disclose that that voltage is at least 200 volts peak to peak or that it is in the range from 500 to 1400 volts peak to peak, and Smith & Nephew does not contend that it does. The Rydell '908 patent does not disclose that the distance between the most proximal portion of the electrode terminal and most distal portion of a return electrode is in the range from about 0.5 to 10 mm, and Smith & Nephew does not contend that it does.

The Rydell '908 Patent does not disclose the ablation of tissue, but merely describes cutting tissue, and Smith & Nephew does not contend that it does. In addition, Rydell '908 Patent does not disclose vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal. Moreover, Rydell '908 Patent does not disclose the discharge of photons to the target site in contact with a vapor layer, and

Smith & Nephew does not contend that it does. Rydell '908 Patent does not disclose that the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2, and Smith & Nephew does not contend that it does. In addition, Rydell '908 Patent does not disclose that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site, and Smith & Nephew does not contend that it does. Moreover, Rydell '908 Patent does not disclose evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal, and Smith & Nephew does not contend that it does.

The Rydell '908 Patent does not disclose that an electrically conductive fluid completes the conduction path between the electrode terminal and a return electrode. In addition, the Rydell '908 Patent does not disclose that an electrical current flows from the active electrode, through the electrically conductive fluid, and to a return electrode. Moreover, the Rydell '908 Patent does not disclose that an active electrode, return electrode, target site, and tissue structure are immersed in electrically conducting fluid. To the contrary, the '908 patent teaches that the fluid is introduced to "flush" or "wash" the target site.

Reference 52: U.S. Patent No. 5,009,656 to Reimels ("Reimels '656"), which was disclosed during the prosecution of the '882 and '592 patents-in-suit, does not anticipate or render obvious any of the claimed inventions.

Reimels '656 describes a device having a pair of electrodes adjacent to each other that are brought into contact with the tissue to be cut or coagulated (figure 2 and column 4 lines 12-15). An "air gap" is formed at the tip of the device between the inner electrode and the outer electrode by removing some of the insulation between the

electrode pair (figure 2 and column 4 lines 12-15). Reimels '656 states that fluid, such as saline, is dispelled from the air gap and that current flows in "sparks" between the electrodes across the air gap (column 4 lines 3-11). Because Reimels '656 states that the inner electrode and the outer electrode are placed in contact with the tissue, and because it states that saline is dispelled from the "air gap" between the two electrodes, Reimels '656 does not suggest how to successfully use the device in electrically conducting fluid, with the fluid being the conduit for electrical current between an active electrode and a return electrode.

The Reimels '656 patent never states that electrically conducting fluid creates a current flow path between the electrodes. To the contrary, the Reimels '656 patent teaches that the electrodes are in contact with the tissue, the electrically conducting fluid is dispelled from the area between the electrodes, and that current flows in the form of "sparks" across an "air gap" between the electrodes, not through electrically conducting fluid (column 4 lines 3-11).

The Reimels '656 patent states that the electrodes are placed in contact with the tissue, and as such it does not disclose that the electrically conducting fluid generates a current flow path between a return electrode and the electrode terminal. In addition, Reimels '656 does not disclose that a return electrode is spaced away from the tissue, and Smith & Nephew does not contend that it does. The Reimels '656 Patent also does not disclose that the voltage applied between a return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz, and Smith & Nephew does not contend that it does. In addition, the Reimels '656 Patent does not disclose that the voltage applied between the electrode terminal and a return electrode is in the range from

about 10 volts (RMS) to 1000 volts (RMS), and Smith & Nephew does not contend that it does.

The Reimels '656 patent also does not disclose that at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum. The Reimels '656 patent does not disclose the voltage at which the device operates, and certainly does not disclose that that voltage is at least 200 volts peak to peak or that it is in the range from 500 to 1400 volts peak to peak, and Smith & Nephew does not contend that it does. The Reimels '656 patent does not disclose that the distance between the most proximal portion of the electrode terminal and most distal portion of a return electrode is in the range from about 0.5 to 10 mm, and Smith & Nephew does not contend that it does.

The Reimels '656 Patent does not disclose the ablation of tissue, and Smith & Nephew does not contend that it does. Moreover, Reimels '656 Patent does not disclose the discharge of photons to the target site in contact with a vapor layer. Reimels '656 Patent does not disclose that the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2, and Smith & Nephew does not contend that it does. In addition, Reimels '656 Patent does not disclose that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site, and Smith & Nephew does not contend that it does. Moreover, Reimels '656 Patent does not disclose evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal, and Smith & Nephew does not contend that it does.

The Reimels '656 Patent does not disclose that an electrically conductive fluid completes the conduction path between the electrode terminal and a return

electrode. In addition, the Reimels '656 Patent does not disclose that an electrical current flows from the active electrode, through the electrically conductive fluid, and to a return electrode.

Reference 74: The CMC-III Bipolar System, attributed to Malis, does not disclose or render obvious any of the claimed inventions. As an initial matter, the Malis materials are not a single reference, but are instead a collection of documents, many of which are undated. As such, it appears that the materials are not prior art. For those that are dated, they are after the effective filing dates of the patents-in-suit.

Both of the electrodes in the Malis materials are in contact with the tissue and create a current flow path between them. The materials state that there is no current flow path through the saline, but instead that all current goes between the forceps through the tissue (SN61176, SN61178, fig. 14, SN61179). As such, the Malis materials do not show a current flow path between active and return electrodes through an electrically conducting fluid. In fact, Malis says opposite: there is no current flow other than through the tissue that is being grasped by the two electrodes. Another distinction between the Malis materials and the claimed inventions is that the device described in the Malis materials uses a biactive approach in which each electrode is of equal size and both are used to treat tissue. As such, Malis does not disclose a return electrode which is designed not to cause a tissue effect and which has a current density lower than the other electrode because Malis discloses a biactive device in which both electrodes are designed to cause a tissue effect (SN61173).

The Malis materials do not disclose that the frequency applied between a return electrode and the electrode terminal is in the range of about 20 kHz and 20 Mhz.

The Malis materials do not disclose that a return electrode is spaced from the electrode terminal to minimize contact between a return electrode and the patient's tissue because a return electrode is designed to be in contact with the tissue. In addition, the Malis materials do not disclose that the voltage applied between the electrode terminal and a return electrode is in the range from 10 volts (RMS) to 1000 volts (RMS). The Malis materials also do not disclose a device for use on a target site selected from the group consisting essentially of the abdominal cavity, thoracic cavity, knee, shoulder, hip, hand, foot, elbow, mouth, spine, ear, nose, throat, epidermis and dermis of the patient's body.

The Malis materials do not disclose a high frequency voltage sufficient to vaporize the fluid over at least a portion of the electrode terminal and to induce the discharge of energy to the target site in contact with the vapor layer. Moreover, the Malis materials do not disclose that at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum. In addition, the Malis materials do not disclose that the voltage applied is at least 200 volts peak to peak or that it is in the range from about 500 to 1400 volts peak to peak. The Malis materials do not disclose that the distance between the proximal portion of the electrode terminal and most distal portion of a return electrode is in the range from about 0.5 to 10 mm.

The Malis materials do not disclose ablation of tissue. In addition, the Malis materials do not disclose vaporizing the electrically conducting fluid in a thin layer over at least a portion of the electrode terminal. Moreover, the Malis materials do not disclose the discharge of photons to the target site in contact with a vapor layer. The Malis materials do not disclose that the electrode terminal has a contact surface area in the range of about 0.25 mm^2 to 50 mm^2. In addition, the Malis materials do not disclose

that the electrode terminal is positioned between 0.02 to 2.0 mm from the target site. Moreover, the Malis materials do not disclose evacuating fluid generated at the target site with a suction lumen having a distal end adjacent the electrode terminal.

The Malis materials do not disclose, as discussed above, a return electrode that is not in contact with the body structure. The Malis materials do not disclose that an active electrode, return electrode, target site, and tissue structure are immersed in electrically conducting fluid. In addition, the Malis materials do not disclose that an electrically conductive fluid completes the conduction path between the electrode terminal and a return electrode. Moreover, the Malis materials do not disclose that an electrical current flows from the active electrode, through the electrically conductive fluid, and to a return electrode.

II. Nonobviousness

ArthroCare objects to providing its contentions as to nonobviousness on the grounds that Smith & Nephew has failed to state a prima facie case that the patents-in-suit may be invalid for obviousness. Smith & Nephew has not articulated any motivation to combine any of the references it is asserting, other than to state that "each reference is directed to the same problem – applying electrical energy to the target site on a patient's body." As a matter of law this is not a motivation to combine. If it were, then any electrosurgical reference, regardless of content and regardless of its teaching, would be combined by a person having ordinary skill in the art with any other reference, regardless of its content or teaching. The absurdity of this result demonstrates that Smith & Nephew has shown no motivation to combine.

In addition, the combinations of references on which Smith & Nephew intends to rely are hopelessly overbroad. For example, Smith & Nephew contends that

Claim 46 of the '536 patent is rendered invalid for obviousness based on the combination of "any one or more of" five references in combination "with any one or more of" eight other references, which results in literally thousands of combinations. As such, ArthroCare is unable to provide a response to the vast array of possible combinations identified by Smith & Nephew.

To the extent that Smith & Nephew at a later time seeks to argue that any of the claims of patents-in-suit are obvious, and makes prima facie case, then ArthroCare reserves the right to argue that any of the references alone or in combination do not render any claims of the patents-in-suit obvious. In doing so, ArthroCare reserves the right to rely on secondary indicia nonobviousness, including arguments based on (a) commercial success of ArthroCare's products that embody one or more claims of the patent-in-suit, (see ARTC 63370-63535, ARTC 64624-64627, ARTC 63926-64181, ARTC 23416-24808, ARTC 25247-27009, ARTC 27937-28855, ARTC 29888-31317, ARTC 31492-34642, ARTC 63608-63619, ARTC 63656-63809, and the transcripts and exhibits from the depositions of John Tighe, Christine Hanni, Fernando Sanchez, Al Weinstein, Michael Baker, and John Raffle in this case); (b) industry acquiescence and acknowledgement of the strength of the patents-in-suit (SN 54891, ORA 0000082, ORA 57060-62, SN 57688-695, ARTC 20679-20731, ARTC 7783-7789, ARTC 7743-7782, ARTC 13955-13964, ARTC 59948-60008, ARTC 25247-27009, ARTC 27937-28222, ARTC 30695-31026, ARTC 31492-32604, ARTC 34148-34642, and the transcripts and exhibits from the depositions of Christine Hanni, Fernando Sanchez, Michael Baker, and John Raffle in this case); (c) evidence that Smith & Nephew has copied ArthroCare's patented technology (ORA 7298-7304, ORA 7734-7961, ORA 50522-525, ORA 8033-

34, ORA 9221, ORA 971-975, ORA 9153, SN 19618, SN 19659-60, SN 20312, SN 21884, SN 29781, SN 34455, SN 36073, and the transcripts and exhibits to the depositions of Duane Marion, Kate Knudsen, Linda Guthrie, Sally Maher, and John Konsin).

IN THE UNITED STATES DISTRICT COURT

FOR THE DISTRICT OF DELAWARE

ARTHROCARE CORPORATION.,	)	
	)	
Plaintiff,	)	
	)	
v.	)	Civil Action No. 01-504-SLR
	)	
SMITH & NEPHEW, INC.,	)	
	)	
Defendant.	)	

MEMORANDUM ORDER

At Wilmington this 9th day of April, 2003, having heard oral argument and having reviewed papers submitted in connection therewith;

IT IS ORDERED that the disputed claim language in United States Patent Nos. 5,697,536; 5,697,882; and 6,224,592, as identified by the above referenced parties, shall be construed as follows, consistent with the tenets of claim construction set forth by the United States Court of Appeals for the Federal Circuit:[1]

[1]**The court notes that claim construction is not final until judgment is entered.** The parties apparently developed their claim construction with a focus on obtaining summary judgment of infringement or invalidity. If, on a more developed record, the court finds the current claim construction to be in error, the claims will be re-construed accordingly.

1. **"Connector."**

The court shall apply the ordinary definition of the word "connector." The word connect means "to bind or fasten together; join or unite; link[.]"[2] The word "connector," in terms of the '536 patent, shall be construed to mean "a structure that electrically links the electrode terminal to the high frequency power supply."

2. **"Electrically Conducting Fluid Supply."**

Consistent with the prosecution history, the phrase "electrically conducting fluid supply" shall be construed to mean "a medical container that stores electrically conducting fluid." (D.I. 267, Ex. 10 at 4-5) An example of a medical container is an IV bag. An example of electrically conducting fluid is isotonic saline. (Id.)

4. **"Spacing a Return Electrode Away From the Body Structure" and "the Return Electrode is Not in Contact with the Body Structure."**

The claim limitation "the return electrode is not in contact with the body structure" is clear - the return electrode is not to contact the body **at all during the performance of the claimed method.**

---

[2]The Random House College Dictionary, 285 (revised ed. 1980).

5. "Electrically Conducting Fluid" and "El ctrically Conductiv Fluid."

Consistent with the ordinary definition, "electrically conducting fluid" and "electrically conductive fluid" shall be construed to mean "any fluid that facilitates the passage of electrical current." Examples of electrically conducting fluids are blood and saline.

6. "Directing or Delivering the Electrically Conductive Fluid to the Target Site."

This phrase shall be construed consistent with its ordinary meaning; no further construction is necessary.

7. "Electrode Terminal."

Consistent with the intrinsic evidence of the patents in suit, "electrode terminal" means "one or more active electrodes."

8. "Active Electrode."

The court shall apply the ordinary definition of the term "active electrode" in the relevant art. The term "active electrode" means "a stimulating electrode . . . applied to tissue for stimulation and distinguished from [a return electrode] by having a smaller area of contact, thus affording a higher current density."[3]

---

[3]The New IEEE Standard Dictionary of Electrical and Electronics Terms, 13 (5th ed. 1993).

9. "R turn Electrode."

As contrasted with an active electrode, the term "return electrode" means "an electrode having a larger area of contact than an active electrode, thus affording a lower current density."[4]

10. "Insulating Member."

The court shall apply the ordinary definition of the phrase "insulating member." Thus, the phrase "insulating member" shall be construed to mean "a member which provides a high degree of resistance to the passage of charge."

11. "500 to 1400 Volts Peak to Peak."

This phrase shall be construed consistent with its ordinary meaning; no further construction is necessary.

12. "Through the Region of the Target Site."

This phrase shall be construed consistent with its ordinary meaning; no further construction is necessary.

13. "Immersing."

The court shall apply the ordinary definition of the term "immersing." The term "immersing" shall be construed to mean "to plunge into or place under a fluid[.]"[5]

---

[4]The court notes that the area of contact in the present invention contacts the electrically conductive fluid. In the prior art, the area of contact contacted the body.

[5]<u>The Random House College Dictionary</u>, 664 (revised ed. 1980).

14. **"El ctrosurgical System."**

The court shall apply the ordinary definition of the term "system." The term "system" shall be construed to mean "an assemblage or combination of things or parts forming a unitary whole[.]"[6]

15. **"Distal End" and "Proximal End."**

The court shall apply the ordinary definition of the terms "distal" and "proximal." The term "distal end" shall be construed to mean "the end situated away from the point of origin or attachment."[7] The term "proximal end" shall be construed to mean "the end situated toward the point of origin or attachment."[8]

United States District Judge

---

[6]The Random House College Dictionary, 1335 (revised ed. 1980).

[7]See The Random House College Dictionary, 385 (revised ed. 1980).

[8]See The Random House College Dictionary, 1066 (revised ed. 1980).

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE

ARTHROCARE CORPORATION, Plaintiff, v. SMITH & NEPHEW, INC. Defendant.	
SMITH & NEPHEW, INC., Counterclaim Plaintiff, v. ARTHROCARE CORPORATION, AND ETHICON, INC., Counterclaim Defendants.	C.A. No. 01-504-SLR

SMITH & NEPHEW'S NOTICE PURSUANT TO 35 U.S.C. § 282

Defendant Smith & Nephew, Inc. ("Smith & Nephew") hereby provides its written notice pursuant to 35 U.S.C. § 282 of the patents and publications that it may rely upon to anticipate, render obvious or show the state of the art with respect to United States Patent No. 5,697,536 ("the '536 patent"), 5,697,882 ("the 882 patent"), and 6,224,592 ("the '592 patent"). Smith & Nephew may also rely on the persons listed below as being prior inventors or having prior knowledge of or as having previously used or offered for sale the inventions of the patents-in-suit. Smith & Nephew also incorporates by reference the items set forth in its responses to Plaintiff's Interrogatories and in the expert reports of Dr. Kenneth Taylor, Dr. Michael Choti, Dr. Kim Manwaring and Ronald Panitch, Esq.

Furthermore, in light of the recent filings by the parties on proposed claim construction, Smith & Nephew reserves the right to further supplement this notice depending on the Court's ruling on claim construction and/or possible new claim constructions.

I. PRIMARY REFERENCES RELIED UPON

A. PATENTS

	Country	Patent No.	Date	Name of Patentee
(1)	US	2,056,377	10/6/36	Wappler
(2)	US	3,815,604	06/11/74	O'Malley et al.
(3)	US	3,828,780	8/13/74	Morrison, Jr.
(4)	US	3,901,242	8/26/75	Storz
(5)	US	3,920,021	11/18/75	Hiltibrandt
(6)	US	3,939,839	2/24/76	Curtiss
(7)	US	3,970,088	7/20/76	Morrison
(8)	FR	2,313,949 No. 76 17587	1/7/77	Hiltibrandt, et al.
(9)	US	4,074,718	2/21/78	Morrison, Jr.
(10)	US	4,092,986	6/6/78	Schneiderman
(11)	US	4,116,198	9/26/78	Roos
(12)	US	4,181,131	1/1/80	Hisao Ogiu
(13)	US	4,184,492	1/22/80	Meinke et al.
(14)	US	4,232,676	11/11/80	Herczog
(15)	US	4,248,231	2/3/81	Herczog et al.
(16)	US	4,326,529	4/27/82	Doss et al.
(17)	US	4,381,007	4/26/83	Doss
(18)	US	4,548,207	10/22/85	Reimels
(19)	US	4,590,934	5/27/86	Malis et al.
(20)	US	4,660,571	4/28/87	Hess et al.
(21)	US	4,674,499	6/23/87	Pao
(22)	US	4,785,823	11/22/88	Eggers et al.
(23)	US	4,805,616	2/21/89	Pao
(24)	US	4,823,791	4/25/89	D'Amelio et al.
(25)	US	4,832,048	5/23/89	Cohen
(26)	WO	90/03152	4/5/90	Considine et al.
(27)	US	4,920,978	5/1/90	Colvin
(28)	US	4,931,047	6/5/90	Broadwin et al.
(29)	US	4,936,281	6/26/90	Stasz
(30)	US	4,966,587	10/30/90	Cosman
(31)	US	4,976,711	12/11/90	Parins et al.

	Country	Patent N .	Date	Name f Patentee
(32)	US	4,979,948	12/25/90	Geddes et al.
(33)	DE	3930451 A1	3/21/91	Hoffmann et al.
(34)	US	5,007,908	4/16/91	Rydell
(35)	US	5,009,656	4/23/91	Reimels
(36)	US	5,035,696	7/30/91	Rydell
(37)	US	5,047,026	9/10/91	Rydell
(38)	US	5,047,027	9/10/91	Rydell
(39)	US	5,080,660	1/14/92	Buelna
(40)	US	5,084,044	1/28/92	Quint
(41)	US	5,085,659	2/4/92	Rydell
(42)	US	5,088,997	2/18/92	Delahuerga et al.
(43)	US	5,098,431	3/24/92	Rydell
(44)	US	5,108,391	4/28/92	Flachenecker et al.
(45)	US	5,112,330	5/12/92	Nishigake et al.
(46)	US	5,122,138	6/16/92	Manwaring
(47)	US	5,167,659	12/1/92	Ohtomo et al.
(48)	US	5,171,311	12/15/92	Rydell et al.
(49)	US	5,197,963	3/30/93	Parins
(50)	US	5,207,675	5/4/93	Canady
(51)	US	5,217,459	6/8/93	Kamerling
(52)	US	5,306,238	4/26/94	Fleenor
(53)	US	5,432,882	6/13/95	Jackman et al.
(54)	US	5,454,809	10/3/95	Janssen
(55)	US	5,496,314	3/5/96	Eggers

B. PUBLICATIONS

	Author	Article Title	Source & Page Nos.	Date
(1)	Leonard I. Malis, M.D.	Bipolar Coagulation in Microsurgery	*MicroVascular Surgery*, 126-131	1967
(2)	A.K. Dobbie	The Electrical Aspects of Surgical Diathermy	*Bio-Medical Engineering* 206-216	5/69
(3)	Honig	The Mechanism of Cutting in Electrosurgery	*IEEE Transactions On Biomedical Engineering*	1/75
(4)	Elasser and Roos	Uber ein Instrument zur leckstromfreien transurethralen Resection (Concerning An Instrument for Transurethral Resection Without Leakage of Current)	*Acta Medicotechnica* (Medizinal-Markt), Vol. 24, No. 4, 129-134	1976

	Auth r	Article Title	Source & Page Nos.	Date
(5)	Piercey, M..D., et al.	Electrosurgical Treatment of Experimental Bleeding Canine Gastric Ulcers: Development and testing of a computer control and a better electrode	*Gastroenterology*, Vol. 74, No. 3, 527-534	1978
(6)	Dennis et al.	Evolutions of Electrofulguration in Control of Bleeding of Experimental Gastric Ulcers	*Digestive Diseases and Sciences*, Vol. 24, No. 11, 845-848	11/79
(7)	Barry MS et al.	The effect of radiofrequency-generated thermal energy on the mechanical and histologic characteristic of the arterial wall in vivo: Implications for radiofrequency angioplasty	*CRC Press, American Heart Journal*, Vol. 117, 332-341	2/82
(8)	Swain et al.	Which Electrode? A comparison of four endoscopic methods of electrocoagulation in experimental bleeding ulcers	*Gut*, 25, 1424-1431	1984
(9)	Robert G. Britain	Letter from Department of Health and Human Services to Jerry L. Malis		4/15/85
(10)	Slager et al.	Vaporization of Atherosclerotic Plaques by Spark Erosion	*JACC* Vol. 5, No. 6, 1382-6	6/85
(11)	Jerry L. Malis	Letter from Jerry L. Malis to Food and Drug Administration		7/25/85
(12)	Ramsay et al.	A Comparison of Bipolar and Monopolar Diathermy Probes in Experimental Animals	*Urological Research* 13:99-102	1985
(13)	Leonard I. Malis, M.D.	Instrumentation for Microvascular Neurosurgery	*Cerebrovascular Surgery*, Vol 1, 245-260.	1985

	Author	Article Title	Source & Page N s.	Date
(14)	Leonard I. Malis, M.D.	Acoustic Neuroma Surgery		1987
(15)	Slager et al.	Spark Erosion of Arteriosclerotic Plaques	*Kardiologie, Kardiol.*76: Supp. 6, 67-71 (1987)	1987
(16)	Valleylab, Inc.	Surgistat Service Manual	Valleylab Part Number 945 100 102 A	7/88
(17)	Leonard I. Malis, M.D.	New Trends in Microsurgery and Applied Technology	*Advanced Technology in Neurosurgery*, 1-16.	1988
(18)	Nardella	Radio Frequency Energy and Impedance Feedback	SPIE Vol. 1068 Catheter-based Sensing and Imaging Technology	1989
(19)	Tucker et al.	A Bipolar Electrosurgical Turp Loop	*The Organizing Committee of the 7th World Congress on Endourology and ESWL Foundation for Advancement of International Science*	1989
(20)	Tucker et al.	A Comparison of Urologic Application of Bipolar Versus Monopolar Five French Electrosurgical Probes	*Journal of Urology* Vol. 141, 662-665	3/89
(21)	Lee et al.	Thermal Compression and Molding of Atherosclerotic Vascular Tissue With Use of Radiofrequency Energy: Implications for Radiofrequency Balloon Angioplasty	*JACC* Vol. 13 No. 5, 1167-75	4/89
(22)	Tucker et al.	In vivo effect of 5 French bipolar and monopolar electrosurgical probes on the porcine bladder	*Urological Research* 18, 291-294	1990
(23)	Kramolowsky et al.	Use of 5F Bipolar Electrosurgical Probe in Endoscopic Urological Procedures	*Journal of Urology* Vol. 143, 275-277	2/90
(24)	Kramolowsky et al.	The Urological Application of Electrosurgery	*Journal of Urology* Vol. 146, 669	9/91

	Auth r	Article Title	Source & Page N s.	Date
(25)	Douglas O. Olsen, M.D.	Bipolar Laparoscopic Cholecystectomy	Bipolar Laparoscopic Cholecystectomy Lecture & Videotape	10/7/91
(26)	Carl A. Larson	Letter from Department of Health and Human Services to Jerry L. Malis		4/22/91
(27)	Codman & Shurtleff, Inc.	The Malis Bipolar Electrosurgical System CMC – III Instruction Manual		7/91
(28)		Valley Forge's new products	CLINICA, 475, 5	11/6/91
(29)	Valley Forge Scientific Corp.	Summary of Safety and Effective Information from 510K		At least as early as 1991.
(30)	Codman & Shurtleff, Inc.	The Malis Bipolar Coagulating and Bipolar Cutting System CMC-II brochure		At least as early as 1991
(31)	Leonard I. Malis, M.D.	The Value of Irrigation During Bipolar Coagulation	*See* ARTC 21602	At least as early as 4/9/93
(32)	ArthroCare	ArthroCare Sept. 93 Investor Video		9/24/93
(33)	Leonard I. Malis, M.D.	New Trends in Microsurgery and Applied Technology	*See* ARTC 21596-21600	At least as early as 4/9/93
(34)	Leonard I. Malis, M.D.	Excerpted from a seminar by Leonard I. Malis, M.D. at the 1995 American Association of Neurological Surgeons Meeting		1995
(35)	Leonard I. Malis, M.D.	Electrosurgery, Technical Note	*J. Neursurg.*, Vol. 85, 970-975.	11/96
(36)	Ian E. Shuman, DDS, FAGD	Bipolar Versus Monopolar Electrosurgery: Clinical Applications	*Dentistry Today*, Vol. 20, No. 12	12/01

II. REFERENCES LISTED ON THE PATENTS-IN-SUIT

A. PATENTS

	Country	Patent No.	Date	Name of Patentee
(1)	US	2,050,904	08/11/36	Trice
(2)	US	4,033,351	07/05/77	Hetzel
(3)	US	4,040,426	08/09/77	Morrison, Jr.
(4)	US	4,043,342	08/23/77	Morrison, Jr
(5)	US	4,202,337	05/13/80	Hren et al.
(6)	US	4,228,800	10/21/80	Degler, Jr. et al.
(7)	US	4,240,441	12/23/81	Khalil
(8)	US	4,476,862	10/16/84	Pao
(9)	US	4,532,924	08/06/85	Auth et al.
(10)	US	4,567,890	02/04/86	Ohta et al.
(11)	US	4,593,691	06/10/86	Lindstrom et al.
(12)	US	4,658,817	04/21/87	Hardy
(13)	US	4,682,596	07/28/87	Bales et al.
(14)	US	4,706,667	11/17/87	Roos
(15)	US	4,709,698	12/16/87	Johnston et al.
(16)	US	4,727,874	03/01/88	Bowers et al.
(17)	US	4,736,743	04/12/88	Daikuzono
(18)	US	4,737,678	04/12/88	Hasegawa
(19)	US	4,762,128	08/09/88	Rosenbluth
(20)	US	4,765,331	08/23/88	Petruzzi et al.
(21)	US	4,785,806	11/22/88	Deckelbaum
(22)	US	4,813,429	03/27/89	Eshel et al.
(23)	US	4,860,752	08/29/89	Turner
(24)	US	4,936,301	06/26/90	Rexroth et al.
(25)	US	4,943,290	07/24/90	Rexroth et al.
(26)	US	4,955,377	09/11/90	Lennox et al.
(27)	US	4,967,765	11/06/90	Turner et al.
(28)	US	4,968,314	11/06/90	Michaels
(29)	US	4,998,933	03/12/91	Eggers et al.
(30)	US	5,007,437	04/16/91	Sterzer
(31)	US	5,037,421	08/06/91	Boutacoff et al.
(32)	US	5,057,105	10/15/91	Malone et al.
(33)	US	5,057,106	10/15/91	Kasevich et al.
(34)	US	5,061,266	10/29/91	Hakky
(35)	US	5,078,717	01/07/92	Parins et al.
(36)	US	5,083,565	01/28/92	Parins
(37)	US	5,102,410	04/07/92	Dressel
(38)	US	5,125,928	06/30/92	Parins et al.
(39)	US	5,147,354	09/15/92	Boutacoff et al.

	Country	Patent N .	Date	Name of Patente
(40)	US	5,151,098	09/29/92	Loertscher
(41)	US	5,176,528	01/05/93	Fry et al.
(42)	US	5,178,620	01/12/93	Eggers et al.
(43)	US	5,190,517	03/02/93	Zieve et al
(44)	US	5,192,280	03/09/93	Parins
(45)	US	5,195,959	03/23/93	Smith
(46)	US	5,217,455	06/08/93	Tan
(47)	US	5,217,457	06/08/93	Delahuerga et al.
(48)	US	5,249,585	10/05/93	Turner et al.
(49)	US	5,261,410	11/16/93	Alfano et al.
(50)	US	5,267,994	12/07/93	Gentelia et al.
(51)	US	5,267,997	12/07/93	Farin et al.
(52)	US	5,273,524	12/28/93	Fox et al.
(53)	US	5,277,201	01/11/94	Stern
(54)	US	5,281,216	01/25/94	Klicek
(55)	US	5,281,218	01/25/94	Imran
(56)	US	5,282,797	02/01/94	Chess
(57)	US	5,290,273	03/01/94	Tan
(60)	US	5,290,282	03/01/94	Casscells
(61)	US	5,300,069	04/05/94	Hunsberger et al.
(62)	US	5,300,099	04/05/94	Rudie
(63)	US	5,301,687	04/12/94	Wong et al.
(64)	US	5,304,170	04/19/94	Green
(65)	US	5,312,395	05/17/94	Tan et al.
(66)	US	5,312,400	05/17/94	Bales et al.
(67)	US	5,314,406	05/24/94	Arias et al.
(68)	US	5,318,563	06/07/94	Malis et al.
(69)	US	5,322,507	06/21/94	Costello et al.
(70)	US	5,324,254	06/28/94	Phillips
(71)	US	5,326,343	07/05/94	Rudie et al.
(72)	US	5,330,470	07/19/94	Hagen
(73)	US	5,330,518	07/19/94	Neilson et al.
(74)	US	5,334,140	08/02/94	Phillips
(75)	US	5,334,183	08/02/94	Wuchinich
(76)	US	5,336,217	08/09/94	Buys et al.
(77)	US	5,336,220	08/09/94	Ryan et al.
(78)	US	5,342,357	08/30/94	Nardella
(79)	US	5,366,443	11/22/94	Eggers et al.
(80)	US	5,370,642	12/06/94	Keller
(81)	US	5,370,675	12/04/94	Edwards et al.
(82)	US	5,380,277	12/06/94	Phillips
(83)	US	5,380,316	01/10/95	Aita et al.
(84)	US	5,383,876	01/24/95	Nardella
(85)	US	5,383,917	01/95	Desai et al.

	Country	Patent No.	Date	Name of Patentee
(86)	US	5,389,096	02/14/95	Aita et al.
(87)	US	5,395,312	03/07/95	Desai
(88)	US	5,417,687	05/23/95	Nardella et al.
(89)	US	5,419,767	05/30/95	Eggers et al.
(90)	US	5,423,803	06/13/95	Tankovich et al.
(91)	US	5,441,499	08/15/95	Fritzsch
(92)	US	5,445,634	08/29/95	Keller
(93)	US	5,496,312	03/05/96	Klicek
(94)	US	5,514,130	05/07/96	Baker
(95)	US	5,556,397	09/17/96	Long et al.
(96)	US	5,569,242	10/29/96	Lax et al.
(97)	US	5,584,872	12/17/96	LaFontaine et al.
(98)	US	5,609,151	03/11/97	Mulier et al.
(99)	US	5,647,869	07/15/97	Goble et al.
(100)	US	5,676,693	10/14/97	LaFontaine
(101)	US	5,681,282	10/28/97	Eggers et al.
(102)	US	5,683,366	11/04/97	Eggers et al.
(103)	US	5,697,281	12/16/97	Eggers et al.
(104)	US	5,697,536	12/16/97	Eggers et al.
(105)	US	5,697,882	12/16/97	Eggers et al.
(106)	US	5,697,909	12/16/97	Eggers et al.
(107)	US	5,700,262	12/23/97	Acosta et al.
(108)	US	5,725,524	03/10/98	Mulier et al.
(109)	US	5,749,869	05/12/98	Lindenmeier et al.
(110)	US	5,766,153	06/16/98	Eggers et al.
(111)	US	5,807,395	09/15/98	Mulier et al.
(112)	US	5,810,764	09/22/98	Eggers et al.
(113)	US	5,860,974	01/19/99	Abele
(114)	US	5,871,524	02/16/99	Knowlton
(115)	US	5,885,277	03/23/99	Korth
(116)	US	5,891,095	04/06/99	Eggers et al.
(117)	US	5,897,553	04/27/99	Mulier et al.
(118)	US	5,902,272	05/11/99	Eggers et al.
(119)	US	5,944,715	08/31/99	Goble et al.
(120)	US	6,004,319	12/21/99	Goble et al.
(121)	US	6,013,076	1/11/00	Goble et al.
(122)	US	6,015,406	1/18/00	Goble et al.
(123)	US	6,027,501	2/22/00	Goble et al.
(124)	US	6,039,734	3/21/00	Goble
(125)	US	6,056,746	5/2/00	Goble et al.
(126)	EP	515 867	12/2/92	Valluvan
(127)	EP	0 597 463	5/18/94	Tierney et al.
(128)	EP	0 703 461 A2	3/27/96	Yates
(129)	EP	0 740 926	11/6/96	Wurzer et al.

	Country	Patent N .	Date	Name of Patentee
(130)	EP	0 740 926 A2	11/6/96	Wurzer et al.
(131)	EP	0 754 437	1/22/97	Goble et al.
(132)	GB	2327350	1/99	Goble et al.
(133)	GB	2327351	1/99	Goble et al.
(134)	GB	2327352	1/99	Goble et al.
(135)	JP	57-57802	4/82	Inoue Kiyoshi
(136)	JP	57-117843	7/82	Nakano Yukiyoshi, Matsuura Masaaki
(137)	WO	90/07303	7/12/90	Janssen
(138)	WO	90/09303	7/90	Dare-Bryan et al.
(139)	WO	91/13650	9/19/91	Cathaud
(140)	WO	92/21278	12/10/92	Edwards et al.
(141)	WO	93/13816	7/22/93	Eggers et al.
(142)	WO	93/20747	10/28/93	Rosar et al.
(143)	WO	94/04220	3/3/94	Edwards et al.
(144)	WO	94/08654	4/28/94	Beuchat et al.
(145)	WO	94/14383	7/4/94	Rudko
(146)	WO	94/14386	7/4/94	Day
(147)	WO	94/26228	11/24/94	Eggers et al.
(148)	WO	95/34259	12/21/95	Desai
(149)	WO	96/00042	1/4/96	Edwards et al.
(150)	WO	97/00646	1/9/97	Goble et al.
(151)	WO	97/647	1/9/97	Goble et al.
(152)	WO	97/24073	7/97	Goble et al.
(153)	WO	97/24993	7/17/97	Goble et al.
(154)	WO	97/24994	7/17/97	Goble et al.
(155)	WO	97/48346	12/97	Goble et al.
(156)	WO	97/48345	12/97	Goble et al.
(157)	WO	98/27879	7/98	Odell et al.
(158)	WO	98/27880	7/2/98	Goble
(159)	WO	99/51155	10/14/99	Goddard et al.
(160)	WO	99/51158	10/14/99	Goddard et al.

B. PUBLICATIONS

	Author	Article Title	Source & Page Nos.	Date
(1)	Rand et al.	Effect of Electrocautery on Fresh Human Articular Cartilage	Journal of Arthroscopic Surgery	1985
(2)	Pearce		Electrosurgery, pp. 17, 69-75, 87	1986
(3)	Buechelt et al.	Excimer laser ablation of fibrocartilage: an in vitro and in vivo study	Lasers in Surgery and Medicine 11:271-279	1991

	Author	Article Title	S urce & Page Nos.	Date
(4)	Costello	Nd: YAG lasser ablation of the prostate as a treatment for benign prostatic hypertrophy	Lasers in Surgery and Medicine 12:121-124	1992

III. Public Domain Books

B. PUBLICATIONS

	Author	Title	Date	Page Nos.
(1)	John A. Pierce	Electrosurgery	1986	1-251.

IV. Individuals

(1) Eberhard Roos

Address: Ing.VDI Eberhard Roos
Semmelweisstr. 1
D 78532 Tuttlingen
GERMANY

Declaration: Declaration of Eberhard Roos 2/11/2003.

(2) Dr. Kim H. Manwaring

Address: Phoenix Children's Hospital
1919 E Thomas Road
Phoenix, Arizona 85016-7710

(3) Dr. Kenneth Taylor,

Address: 375 Golden Eagle Drive
Broomfield, CO 80020

(4) Dr. Michael Choti,

Address: 600 North Wolfe Street, Halsted 614
Baltimore, Maryland 21287-5614

(5) Jerry L. Malis

Address: 136 Green Tree Road
Oaks, PA 19456

(6) Dr. David Present

Address: Unknown

(7) Ginger More

Address: Unknown

(8) Leonard I. Malis, M.D.

Address: Street Address Unknown
New York City, NY

Dated: March 28, 2003

FISH & RICHARDSON P.C.

By: ______________________

William J. Marsden, Jr. (#2247)
Keith A. Walter, Jr. (#4157)
Eugene B. Joswick (#4271)
919 N. Market Street, Suite 1100
P.O. Box 1114
Wilmington, DE 19899-1114
Telephone: (302) 652-5070
Facsimile: (302) 652-0607

Mark J. Hebert
Thomas M. Johnston
225 Franklin Street
Boston, MA 02110-2804
Telephone: (617) 542-5070
Facsimile: (617) 542-8906

Kurtis D. MacFerrin
500 Arguello Street, Suite 500
Redwood City, California 94063
Telephone: (650) 839-5070
Facsimile: (650) 839-5071

Attorneys for Defendant
SMITH & NEPHEW, INC.

CERTIFICATE OF SERVICE

I hereby certify that on this 28th day of March, 2003, a true and correct copy of the SMITH & NEPHEW'S NOTICE PURSUANT TO 35. U.S.C. § 282 was caused to be served on the attorneys of record at the following addresses as indicated:

BY HAND DELIVERY
Jack B. Blumenfeld, Esq.
Morris, Nichols, Arsht & Tunnell
1201 North Market Street
P.O. Box 1347
Wilmington, DE 19899-1347

Attorney for Plaintiff
Arthrocare Corporation

BY FACSIMILE AND FEDERAL EXPRESS
Matthew D. Powers, Esq.
Jared Bobrow
Perry Clark, Esquire
Weil, Gotshal & Manges LLP
201 Redwood Shores Parkway
Redwood Shores, CA 94065

Attorneys for Plaintiffs
Arthrocare

BY HAND DELIVERY
Steven J. Balick, Esq.
Ashby & Geddes
222 Delaware Avenue, 17th Floor
P. O. Box 1150
Wilmington, DE 19899

Attorney for Plaintiff/Counterclaim
Defendant
Ethicon, Inc.

William J. Marsden, Jr.

20570296.2.doc

Page 759

- VOLUME E -

IN THE UNITED STATES DISTRICT COURT
IN AND FOR THE DISTRICT OF DELAWARE

- - -

ARTHROCARE CORPORATION, : CIVIL ACTION
Plaintiff :
vs. :
SMITH & NEPHEW, INC., :
Defendant : NO. 01-504 (SLR)

- - -

Wilmington, Delaware
Tuesday, May 6, 2003
9:30 o'clock, a.m.

- - -

BEFORE: HONORABLE SUE L. ROBINSON, Chief Judge, and a jury

- - -

APPEARANCES:

MORRIS, NICHOLS, ARSHT & TUNNELL
BY: JACK B. BLUMENFELD, ESQ. and
KAREN JACOBS LOUDEN, ESQ.

-and-

Official Court Reporters

Page 760

APPEARANCES (Continued):

WEIL, GOTSHAL & MANGES
BY: JARED BOBROW, ESQ.,
TIMOTHY DeMASI, ESQ. and
PERRY R. CLARK, ESQ.
(Redwood Shores, California)

Counsel for Plaintiff

FISH & RICHARDSON P.C.
BY: WILLIAM J. MARSDEN, JR., ESQ.,
KEITH A. WALTER, ESQ. and
EUGENE B. JOSWICK, ESQ.

-and-

FISH & RICHARDSON
BY: MARK J. HEBERT, ESQ.,
(Boston, Massachussetts)

-and-

FISH & RICHARSON
BY: KURTIS D. MacFERRIN, ESQ. and
KAREN I. BOYD, ESQ.
(Redwood City, California)

Counsel for Defendant

- - -

Page 761

PROCEEDINGS

(Proceedings commenced in the courtroom, beginning at 9:30 a.m., and the following occurred without the presence of the jury.)

THE COURT: Are there any issues before we bring our jury in.

MR. MacFERRIN: Opposing counsel has some objections to some of the exhibits we intend to use with the witness and also to some deposition testimony we intend to read to the jury.

MS. LOUDEN: I believe as to the evidence that Smith & Nephew said it will introduce this morning, there are two outstanding issues.

One is the use of certain demonstrative exhibits, which we have objected to.

There is a couple of slides, but they fall in the same category.

The first relates to Claim 1 of '882, which your Honor will recall is subject to the certificate of correction. Smith & Nephew's experts have offered no opinion about whether the claim is invalid or not. Yet they purport to have some slides which show the claim as

Page 762

if it is not the corrected claim with its crossouts and changes.

So we object to it both in terms of it being outside of the expert report as well as being argumentative and portraying the claim of something other than what it is right now.

The second kind of objection which applies to two or three of Smith & Nephew's exhibits, which I understand they intend to use with fact witnesses -- perhaps they could clarify but, in any event, they have a number of slides -- we have no objection to the picture. For example, this is a picture here of the Smith & Nephew system. But they have argumentative headings, like the fluid supply is not part of the ElectroBlade system.

Lawyer argument, of course, is not evidence. We don't think they should be able to put up a demonstrative that makes their arguments while they are examining witnesses.

We can just deal with the demonstratives or I can move to the deposition designations as well.

THE COURT: No. Let's get done with the demonstratives first.

The ones on the asserted claims of the '882 patent, I am not so troubled by the exhibit itself as the fact that it's outside the scope of the expert's report.

Q. Okay. I'd like t finally go back to the SWOT analysis and just be sure that we understand and you make clear to us whose perspective the SWOT analysis is done from.

MR. MR. HEBERT: So if we could get PX-343, please... And it would be Page 48 within the document.

BY MR. HEBERT:

Q. You were shown this page in cross-examination, Mr. Sparks. The SWOT analysis begins at the bottom of the page and it's for ArthroCare; right?

A. Yes, that is correct.

Q. Okay. From whose perspective is a SWOT analysis supposed to be written from?

A. Again, as I said earlier, you put yourself into the shoes, if you will, of the other company and think about their business as they would, so that you're looking at it from the inside out and making determinations about what strength, weaknesses, opportunities and threats exist.

Q. Would it be fair to say that in doing a SWOT analysis, you are pretending to be the other company and thinking about how they would view the world?

MR. BLUMENFELD: Objection, leading.

THE COURT: Overruled.

THE WITNESS: Yes. The answer to the question

is you are putting yourselves in their shoes, as I said, so you are pretending you are ArthroCare or Johnson & Johnson or Olympus or Mitek or whomever.

BY MR. HEBERT:

Q. And what is the purpose of doing that, of pretending you are the other company?

A. It eliminates -- it makes it more objective and less subjective. So if you do it and you use your own biases and opinions, then you will miss what is a strength or a weakness or opportunity or threat so you avoid doing that. And that's the reason why you pretend to be the other company, so that you make sure you touch everything that needs to be looked at, ultimately to figure out what their strategy might be. You're guessing at their strategy.

Q. Why would you want to try to figure out what the strategy of a competitor might be?

A. It's all about anticipation. Our goal as an organization is to always be the most technologically advanced in every area we operate in so you are using that as an opportunity to anticipate how they may act and, therefore, make sure that your own strategy is not one that is going to lead you down the wrong path.

MR. HEBERT: Nothing further.

THE COURT: All right. You may step down. Thank you very much.

THE WITNESS: Thank you, your Honor. Thank you, folks.

(Witness excused)

- - -

MR. MacFERRIN: Good afternoon. My name is Kurtis MacFerrin. I'm one of the attorneys representing Smith & Nephew. And I will be calling Dr. Kim Manwaring as Smith & Nephew's next witness. Dr. Manwaring will testify about his opinion that certain claims in the '882 patent are invalid.

Your Honor, for its next witness, Smith & Nephew calls Dr. Manwaring.

THE COURT: All right. I think we'll have to speak into the microphone a little bit more.

MR. MacFERRIN: All right. I will, your H nor.

THE COURT: Thank you.

MR. HEBERT: Your Honor, if I might tidy up... Julie, if you can assist...

A VOICE: Yes.

MR. HEBERT: I'll help.

- - -

... DR. KIM MANWARING, having been duly sworn as a witness, was examined and testified as follows ....

DIRECT EXAMINATION

BY MR. MacFERRIN:

Q. Good afternoon, Dr. Manwaring.

A. Good afternoon.

Q. Would you please introduce yourself to the jury?

A. Yes. I'm Kim Manwaring.

Q. Where do you live, Mr. Manwaring?

A. Phoenix, Arizona.

Q. Are you married?

A. Yes.

Q. Do you have any children?

A. Yes.

Q. How many?

A. Three.

Q. How long have you been married?

A. 26 years.

Q. You're a medical doctor?

A. Yes.

Q. How long have you practiced medicine?

A. Since 1982.

Q. And where is your practice?

A. In Phoenix.

Q. And where specifically do you practice?

A. Phoenix Children's Hospital.

Page 879

Q. And what is your practice?
A. I specialize in the subspecialty of neurosurgery called pediatric neurosurgery.
Q. Does that work include clinical and research?
A. In my position, that is correct.
Q. What kind of research do you do?
A. A variety of dissection and monitoring technologies that may eventually impact diseases affecting children.
Q. Does that work include developing devices for use in surgeries?
A. Yes.
Q. What kind of devices are those?
A. Techniques, actual instruments or tools used in the operating rooms of neurosurgeons to facilitate the outcome.
Q. How often are you in the operating room?
A. I do about 300 surgical procedures a year. Typically, five or six cases a week would be common.
Q. What kind of procedures do you perform?
A. A variety of problems for children, include the management of head trauma such as the swelling or hemorrhage in the brain when a child suffers an accident like falling off a bicycle or hit by a car. Tumour surgery, a form of cancer within the brain or spinal cord. Malformations of the spinal cord or nervous system such as spina bifida, reconstruction surgeries of the head and

Page 880

face when it's malformed.
Q. Do you use -- what kind of devices do you use to perform those procedures?
A. The instruments commonly consist of dissectors or knives, forms of tweezers or forceps. Neurosurgery contains a number of very specialized instruments because of the constraints or limitations of working on the brain.
Q. Do you use any electrosurgical devices in your practice?
A. Yes.
Q. And what kind of devices are those?
A. Monopolar and bipolar electrode surgery is common or main stage neurosurgery.
Q. Do you use any devices that you developed?
A. Yes.
Q. What device is that?
A. A common device I use is called the Cogman ME2, which is a contraption used as an micro endoscopic dissector.
Q. When you say that, in other words, what is a microscopic dissector?
A. When we enter into the brain through a small incision, we can actually pass an endoscope deep into a target with minimal injury to the brain. When we're visualizing that target within the brain, we use

Page 881

instruments that allow the dissection or focusing or coagulation or actual removal of tissue through that spot and hence the term micro, because it's through an endoscope where they're magnifying and it's very tiny to operate, typically on the range of, oh, a 16th of an inch, an 8th of an inch area.
Q. That is because you are operating on children?
A. No, these principles also apply to adult neurosurgery. And I do do adult neurosurgery occasionally when it applies to my specialty.
Q. Do you have any patents or publications in the field of electrosurgery?
A. Yes.
Q. Roughly, how many?
A. I have two patents in electrosurgery.
Q. And roughly how many publications do you have?
A. Several. I'd have to look at my curriculum vitae or CV to count them.
Q. What is a curriculum vitae?
A. It's a summary or listing of my publications, presentations, patents, funding I've received to do research.
Q. Could you turn please to Tab DTX-427 in your binder?
A. Yes.
Q. Can you identify that for us?

Page 882

A. Yes. This is my curriculum vitae.
Q. Is that like a resume?
A. Yes.
Q. Is this an accurate description of your curriculum vitae as of the time it was updated in October of 2002?
A. Yes.
MR. MacFERRIN: Your Honor, I ask this exhibit, DTX-427, be admitted into evidence.
MR. BOBROW: No objection.
THE COURT: Thank you.
THE DEPUTY CLERK: So marked.
*** (Defendant's Exhibit No. 427 was received into evidence.)
BY MR. MacFERRIN:
Q. Have you received any awards for your work?
A. Yes.
Q. More than one?
A. I'm sorry?
Q. Have you received more than one?
A. Yes.
Q. Now, I'd like to ask specifically about this case. How did you first become involved in this case?
A. About one year ago, you, Mr. MacFerrin contacted me asking me if I would be willing to review the patent in question as it related to certain claims.

Q. Are you being compensated for your time working on this case?
A. Yes.
Q. What were you asked to do?
A. I was asked to read through and compare also to my patent, and render a judgment whether I felt those claims were valid.
Q. Could you turn please to JTX-2, the binder in front of you?
A. (Witness complied.)
Q. What is this?
A. Yes. This is the patent you asked me to review. It is authored by Mr. Eggers and it is referred to subsequently as the '882 patent.
Q. What work did you do for your review of this patent?
A. I read through this patent as well as some additional materials, including my patent, and reviewed in discussion with you principally by telephone at a distance my reactions to it.
Q. Other than your patent, were there any other materials that you reviewed?
A. Yes. I was subsequently given additional materials that included the opinion of Dr. Goldberg.
Q. Did you form an opinion on whether or not the '882 patent claims are valid?

A. Yes.
Q. What is your opinion?
A. I feel that the claims and limitations are, in large part, not valid. When I say in large part, some of them I feel are unique and valid.
Q. How about Claims 13 -- if I could direct your attention to Claims 13 and 54 of the '882 patent...
Did you reach an opinion on the validity of those patents?
A. Yes.
Q. What is your opinion?
A. They are not valid.
Q. I'd now like to ask you about your patent. If you could turn please to DTX-46 in your binder...
MR. MacFERRIN: Gary, could you pull this up, please?
BY MR. MacFERRIN:
Q. Is this the '138 patent from which your opinion is based?
A. Yes.
Q. Is that your name there?
A. Yes.
Q. Now, what does this patent show?
A. This is the description of a device which I developed and routinely use in the operating room. It

is called a tissue vaporizing accessory and method for an endoscope.
Q. Are you familiar with the term monopolar?
A. Yes.
Q. Did you read Mr. Eggers' testimony about the '882 patent?
A. Yes.
Q. Did you read the part where he discusses Claim 1 of his patent includes monopolar?
A. That can employ and work with a monopolar approach, that's correct.
Q. What kind of device is your device?
A. My device is monopolar.
MR. MacFERRIN: Your Honor, I move that DTX-46 be admitted into evidence.
THE COURT: And actually it shouldn't have been on the screen until it was admitted into evidence.
Is there any objection?
MR. BOBROW: No objection.
THE COURT: All right. Thank you.
MR. MacFERRIN: I apologize.
THE COURT: That's all right.
BY MR. MacFERRIN:
Q. Did the device described by this patent ever become a product?

A. My patent?
Q. Yes.
A. Yes, that is a product.
Q. And what is the name of that product?
A. Yes, this is the Cogman ME2 I was referring to earlier in one of your previous questions.
Q. Do you make or sell that product?
A. No.
Q. Does someone else make or sell that product?
A. Yes.
Q. Who is that?
A. It's marketed by the Division of Neurosurgery within Johnson & Johnson which is called Cogman.
Q. I'd now like to turn to the basis for your opinions.
A. Okay.
Q. What is the basis for your opinion that Claims 13 and 54 of the '882 patent are invalid in view of your patent?
A. I feel my patent describes each of the those entities when read carefully matched component to component.
Q. I'd now like to ask you how did you that analysis.
MR. MacFERRIN: Gary, could you please put up DTX-201?

Page 887

BY MR. MacFERRIN:
Q. If I could correct your attention to this slide. Could you tell us what this is showing us?
A. The pictogram on the right is derived directly from my patent on the front page and shows the tip of my vaporizing accessory.
On the left, in the left column under Claim 1 of '882 is the word description or first claim of Mr. Eggers' patent.
Q. Would it help you to have a laser pointer to use?
A. I suppose.
MR. MacFERRIN: Your Honor, may I approach?
THE COURT: Yes, you may.
BY MR. MacFERRIN:
Q. Before I ask you about this, I just want to make sure that I was clear about one thing about Mr. Eggers' testimony you read. His testimony about monopolar, that did not concern your patent, did it?
A. Not that I understand, no.
Q. Did that concern his patent, the '882 patent?
A. Yes.
Q. Does your patent disclose the first part of Claim 1 shown here, method for applying energy to a target site on a patient body structure?

Page 888

A. Yes. In fact, I feel Claim 1 is a very good description of my patent.
Q. Have you read Dr. Goldberg's rebuttal report?
A. Yes.
Q. Did you read that after you had submitted your report?
A. No, I read it first. I'm talking about that which was supplied to me about two months ago. I read his report at that point but the rebuttal I've been aware of subsequently; only recently read that, perhaps three days ago.
Q. But you have read that?
A. Yes.
Q. And in his report, in that rebuttal report, does he disagree with you that is patent discloses limitations?
A. Yes. Oh, I'm sorry. I misunderstood you. His disagrees about limitations and my interpretation, but he does not disagree with this Claim 1 that also describes my patent.
Did I understand you c rrectly?
Q. I think you did.
A. Okay. Could you talk just a little louder?
Q. Okay. Sorry.
A. Thank you.
Q. I'm getting over a cold.
MR. MacFERRIN: Could I have the next graphic,

Page 889

please?
This is DDTX -- actually DDTX-202. Could I have DDTX-202 please?
Okay.
BY MR. MacFERRIN:
Q. Well, let me ask you, about -- sorry.
(Pause.)
BY MR. MacFERRIN:
Q. Here we go. It looks like it's a little out of order. I apologize. This is DDTX-204. And I'd like to ask you about -- do you see that? What is this graphic showing us?
A. Well, again, this is my same picture on the front of my patent, but the tip of it, the tip of the electrode within the tip of the catheter itself or the device that is passed through an endoscope is highlighted in red, and on the left is a column extracting or highlighting certain words of Mr. Eggers' patent providing an electrode terminal, and here in my description of my patent is essentially the identical description.
Q. Can you point out, is there an electrode terminal?
A. Yes. I'm sorry. The first end of the electrical conductor extends coaxially through the tube.
This is the equivalent of the electrode terminal.

Page 890

MR. MacFERRIN: May I have DDTX-202?
BY MR. MacFERRIN:
Q. And what is this graphic showing us?
A. Again, the same picture, and again, wording from Claim 1 from Mr. Eggers' and wording from my patent. Here, we're describing the necessity to have this device function correctly is that of a return electrode which is electrically coupled to a high-frequency voltage source.
In my description, in accordance with standard practice, the RF generator, radio frequency generator, is grounded to the patient on whom surgery is to be performed.
Q. And in his report, does Dr. Goldberg disagree with your conclusion that your patent discloses this feature?
A. No.
Q. Did he disagree with the previously-featured electrode terminal that which was disclosed in your patent?
A. No.
MR. MacFERRIN: Can I have the next graphic, please?
BY MR. MacFERRIN:
Q. Would you please explain to us what this graphic is showing?
A. In the '882 patent of Mr. Eggers, highlighted terms are, relate more to the method or technique of use now

Page 891

that the electrode terminal is positioned in close proximity to the target site in the presence of an electrically conducting fluid.

Then derived from my patent, as illustrated in Figures 2 and 4, a source of pressurized fluid such as electrically conductive saline can be injected into the second input of the Tuohy-Borst adaptors. This is how my device is hooked up. These are merely connectors.

Q. In his report, does Dr. Goldberg disagree that your patent discloses this feature?

A. No.

MR. MacFERRIN: For the record, this is DDTX-204.

Could I next have -- actually, yes, can I next have DDTX-205? DDTX-206.

(Pause.)

- - -

Page 892

BY MR. MacFERRIN:

Q. Dr. Manwaring, what is this graphic?

A. This is, again, that same format. In Mr. Gregor's patent he explains it is necessary to apply a high-frequency voltage between the electrode terminal and the return electrode. The high-frequency voltage being sufficient to vaporize the fluid in a thin layer over at least a portion of the electrode terminal.

In my device, I describe the exact same concept. The adjacent tissue is rapidly dessicated and then vaporized. Such RF sparking followed by fluid vaporization is generally referred to as fulguration and is a well-known phenomenon.

I should explain, in my picture, fluid-filled medium, the tip of this electrode is placed in salt-laden fluid. In the instance of the brain, that as cerebrospinal fluid. In the instance of other targets, it is very similar fluid, call physiologic saline, and acts the same from an RF or electrosurgery point.

Q. That spark that you described, what does that reflect?

A. Off of the tip of the electrode emits a spark. Since there is salt fluid in the tip of that environment, as RF or lectricity is passed down through that tip, the salt

Page 893

fluid is conductive of electricity.

So as current heat passes through it, it heats the fluid in the tiny recessed tip area. That creates a steam barrier. And now the electricity passes across by sparking or arcing, which is an essential component for my device to work.

Q. You mentioned steam. Does that have an appearance? Do you see bubbles?

A. Yes. In operation, one does visualize bubbles.

Q. And the spark or arc that you described, does that have -- can you describe that appearance for us?

A. Yes. It has a kind of yellow-orange glow.

MR. MacFERRIN: If I can have DDTX-206...

BY MR. MacFERRIN:

Q. Dr. Manwaring, could you describe what we are seeing here?

A. Yes. In Claim 13 now of Mr. Eggers' patent, the method of Claim 1 wherein at least a portion of the energy induced is in the form of photons having a wavelength in the ultraviolet spectrum.

Then in my patent, such RF sparking is generally referred to as fulguration and is a well-known phenomenon.

Q. Does that sparking result in ultraviolet light?

A. I am sure it does.

Page 894

Q. Why are you sure that it does?

MR. BOBROW: Object, your Honor. That is beyond the scope of his report.

THE COURT: Overruled. The specific matter that we discussed cannot be admitted. If there is another basis for that opinion, that doesn't involve the matter we discussed, then I will allow the question.

MR. MacFERRIN: Thank you, your Honor.

THE WITNESS: I can answer?

BY MR. MacFERRIN:

Q. Yes.

A. When an electrode is put into salt water, whether it is a monopolar pencil blade or my electrode or Mr. Eggers' electrode, if it is in salt water and electricity is passing through it with sufficient intensity to create sparking, that sparking emits light. And some of that light is perceivable by the eye, which is the orange/ yellow glow I described, but some of it is not perceivable by the eye, which is outside of that range.

Q. Can you think of any other examples of something you can't see, but you know it's there?

A. Sure. In the instance of light, since we are talking about light, most of us are familiar with the famous scientist Isaac Newton. Isaac Newton held up a prism in the sunlight and, as the sunlight passed through

the prism, he saw on the back wall a whole display of colors, which we now refer to as a rainbow, because the exact same thing happens in the sky as sunlight passes through moisture.

And that rainbow includes colors that we are all familiar with, tapering out at both ends to no other colors.

But Isaac Newton found that there were other colors in that light spectrum that couldn't be seen with the eye. In fact, he is the one who gave us the term infrared, which means below red, because he discerned that there was heat being emitted in the prism beyond where there was no light.

So infrared is an example of light you can't see but you can feel. The other end of the spectrum is ultraviolet, which is also there, but we can't see it with our eyes. We know it's there.

MR. MacFERRIN: May I have the next one, please?

BY MR. MacFERRIN:

Q. DDTX-207. Dr. Manwaring, could you describe for us what this graphic is showing?

A. Yes. Again, in Mr. Gregor's patent is a Claim No. 54, which also derives from Claim 1. It describes a method with a device further comprising evacuating fluid generated

at the target site with a suction lumen having a distal end adjacent to the electrode terminal.

And in my patent, the similar wording, again. Again, this tip is in that fluid environment. In such an alternative embodiment of the invention, a neutral or negative pressure could be provided within the fluid interior of Tube 28 such that the fluid from the fluid-filled medium of the working environment could be sucked or drawn up to a sufficient elevation.

Q. So does your patent disclose this additional feature of Claim 54?

A. Yes.

Q. If I could ask you now to turn to DTX-46 in your binder...

Dr. Manwaring, do you understand your patent -- what date did your patent issue?

A. June 16, 1992, my patent was issued.

Q. And looking at Item 22 on the left, do you see that there, Dr. Manwaring?

A. Yes.

Q. What date was the application for your patent filed?

A. November 28, 1990.

MR. MacFERRIN: Thank you.

THE COURT: Cross-examination.

CROSS-EXAMINATION

BY MR. BOBROW:

Q. Good afternoon, Dr. Manwaring.

A. Good afternoon.

Q. We met briefly in the hallway. My name is Jared Bobrow. I am one of the attorneys representing ArthroCare Corporation.

First of all, you still have your patent, the '138 patent; is that right?

A. Yes.

Q. And if I understood what you just testified to about ultraviolet photons, it's your testimony that where you refer in this patent to sparking, that that is a disclosure of the emission of ultraviolet photons; is that right?

A. The emission of all light that arises from that process.

Q. Does that include ultraviolet photons?

A. Sure.

Q. Now, your patent never refers to ultraviolet photons, does it?

A. No.

Q. There is no mention in it, in fact, of ultraviolet light; is that correct?

A. That's correct.

Q. And at the time that you prepared your report in this matter back in February of this year, you hadn't done any tests to determine whether the device that is described in your '138 patent emits photons of ultraviolet light. Is that true?

A. That's correct.

Q. Now, its also true, is it not, that back at the time of your report, back in February, you were not aware of anybody else doing any testing on your device that is described here in the '138 patent to show that it emits ultraviolet photons; correct?

A. At that time, that's correct.

Q. You are not a physicist. Is that true?

A. No, I am not a physicist.

Q. You do not have a degree in physics; is that right?

A. That's correct.

Q. You do not have a degree in electrical engineering. Is that true?

A. That's correct.

Q. Now, with respect to your testimony, you mentioned something about Isaac Newton; right?

A. Yes.

Q. And you mentioned that he detected that there was infrared light beyond the visible portion of the rainbow.

Page 899

True?
A. That's correct.
Q. It sounds like he did some sort of a test; is that right?
A. Yes. He held a prism into the sun.
Q. And he was able to then detect heat beyond the area; correct?
A. Yes.
Q. And so he detected this empirically; is that right?
A. That's fair to say.
Q. And at the time that you prepared your report, you did nothing empirically to determine that UV photons are emitted by the device that is described in your patent, the '138 patent. Is that true?
A. Yes. At that time I had not.
Q. Now, your device that you describe in here is a monopolar device; correct?
A. Correct.
Q. And that means that the return electrode is attached someplace to the outside of the patient's body; correct?
A. Yes.
Q. And oftentimes that's attached to the thigh or the back or what-have-you. True?
A. Correct.
Q. So when you mention that there was electrically

Page 900

conducting fluid in the brain, for example, I take it that the return electrode in your invention is not in contact in any way with that electrically conductive fluid. Is that true?
A. Yes. In the sense that it's attached to the outside of the body and one is working on the inside, I believe that's a fair characterization.
Q. So the return electrode in your invention doesn't contact the electrically conductive fluid; is that right?
A. That's correct.
Q. Now, you also, I believe, talked about on your direct examination this issue of suction.
MR. BOBROW: Perhaps we can put Figure 5 of the '138 patent up on the screen.
If you can blow that up, Chris, I would appreciate it.
BY MR. BOBROW:
Q. Here, Dr. Manwaring, you see there it says fluid-filled medium; is that right?
A. Yes.
Q. And what we are looking at there is the tip of this device. Is that true?
A. That's correct.
Q. And the fluid-filled medium in the case of surgery on the brain is that cerebrospinal fluid; right?

Page 901

A. No, not necessarily. Just like arthroscopic surgery, we must maintain a certain amount of brain enlargement because we have entered in with a trochar. And, therefore, we inject fluid, which is compatible or like cerebrospinal fluid, which happens to be physiologic saline or something very similar to it.
Q. But in your -- let me ask a different question. The brain is surrounded by cerebrospinal fluid; is that right?
A. Yes.
Q. In fact, the body generates its on cerebrospinal fluid; is that right?
A. Yes.
Q. About how much a day?
A. About 700 milliliters. That would be a typical -- that is almost a quart for your reference. Most adults would make about that much a day.
Q. And the brain is surrounded by that, such when you go into the surgical site there is cerebrospinal fluid that is present; correct?
A. Yes.
Q. And in your patent, there is one embodiment where you talk about introducing some saline through that tube; right?
A. Yes.

Page 902

Q. And the rate at which the saline is introduced is at the rate of a couple of drops a second; right?
A. Yes.
Q. About three or four drops per second. True?
A. You could perhaps show me where you are referring.
Q. That is Column 7, if you would like to look. Column 7, about Line 10.
A. But for your purposes, I have no concern about that.
Q. Now, if we could go to Column 7 of the patent, please. The paragraph that begins at Line 11 and goes to Line 31.
MR. BOBROW: If you could please highlight that...
BY MR. BOBROW:
Q. Dr. Manwaring, here in your patent you are describing an embodiment in which you are not delivering fluid to the surgical site; is that right?
A. Yes.
Q. In fact, at Lines 19 through 21, it begins by saying, If the source of pressurized fluid as illustrated in Figure 2 were omitted, s me alternative means would have to be provided to fill at least the interior tip of 32 with fluid to enable the invention to operate in the fulguration mode as described above, and it goes on.
Do you see what I am referring to there?
A. Yes, I do.

Page 903

Q. So in that column, in describing this section, there is no electrically conductive fluid being introduced into the surgical site; correct?
A. In that the instrument is introduced into the fluid medium, it exists there and this is what is referenced to before as the neutral environment, in contrast to a sucking environment, which would be negative or a positive environment where one was irrigating forward.
Q. Just to be clear here, what you are describing in the paragraph that is up on the screen is an embodiment where fluid is not being introduced into the brain cavity?
A. Yes, that's correct.
Q. Okay. Now, what you are describing here, then, is using either neutral or some sort of negative pressure to suck up some of the fluid that is in the brain already; correct?
A. That's correct.
Q. That would be the cerebrospinal fluid; right?
A. No. In the practical application, we always have mixed salt water, or physiologic saline which has been introduced by the endoscope for the exact same reasons we do in arthroscopic surgery, it is to clear blood, maintain that crystal-clear environment. So in appropriate description, it is a mix.
Q. Fair enough. And when the energy is applied using

Page 904

your device, in this embodiment you are describing here, the application of the energy isn't creating electrically conductive fluid, is it?
A. No. It's not creating -- that electrically conductive fluid is there at the tip.
Q. And the application of energy is not what is generating either cerebrospinal fluid or saline or any other fluid. True?
A. Correct.
Q. Now, when you put either neutral or negative pressure at the tip, isn't it fair to say that then some fluid gets sucked in at the tip of the device; correct?
A. In the instance --
Q. So it goes --
A. In the instance of the neutral environment, the tip is barely recessed. It is a non-contact technique. So when the device is put into that space, fluid wells into it readily.
Q. Wells up into the tube of this device?
A. That's right.
Q. And then the device is then placed in the vicinity of the target tissue that you want to treat; correct?
A. Exactly.
Q. So isn't it fair to say, then, that if fluid remains at or on the target site, that you are trying to treat in

Page 905

the course of a surgery?
A. That's correct.
Q. Now, let's take a look at Claim 1 of the '882 patent, which is JTX-2.
MR. BOBROW: If you can go to the last Page of JTX-2...
BY MR. BOBROW:
Q. Do you have that in your binder, sir?
A. I can bring it up, yes.
MR. BOBROW: If you would please, Chris, highlight the last paragraph, that begins applying a high-frequency voltage.
BY MR. BOBROW:
Q. Dr. Manwaring, in this paragraph, I just want to make sure that I have down here the sequence at least as you understand it of events that are being described here. The first thing that happens is that a high-frequency voltage is being applied between the active electrode and the neutral, or return electrode. Is that true?
A. Yes. The return electrode.
Q. And by virtue of the application of that voltage, then, the next thing that happens is that you vaporize some fluid that is in the vicinity of the very tip of the active electrode; right?
A. I agree.

Page 906

Q. And then once you form that vapor area in the tip of the electrode, then what happens is you get this energy discharge, either, you know, plasma or arcs or what-have-you at the tip of the device, sparks, for example?
A. You have used sparking, yes.
Q. Essentially what is described here in the '882 patent is application of a voltage followed by a vaporization of the electrically conductive fluid, followed by sparking; is that right?
A. I agree.
Q. Now, your patent describes something different, doesn't it?
A. No.
Q. Well, let's take a look and see. Let's take a look at Column 6 of your patent. Specifically, the paragraph beginning at Lines 50 through 63?
MR. BOBROW: If you could highlight that, Chris, I would appreciate it.
BY MR. BOBROW:
Q. Now, this is a paragraph that you had up earlier when you were being asked questions on direct examination; correct? Is that right?
A. Yes, that's correct.
Q. And when you had this paragraph up, you were saying that this language described the paragraph that we were

Page 907

just looking at in the '882 patent; correct?

A. Yes.

Q. And here, in your patent, in the '138 patent, it refers in this patent, beginning at about Line 54, it says, when end phase 40 is placed either in close proximity to or in contact with tissue, as illustrated in Figure 5, the sparking results in the generation of extremely high temperatures, causing vaporization of the fluid within region 46 and virtually instantly achieves temperatures estimated to reach approximately 400 degrees Centigrade. Then it goes on a little further down: Such RF sparking followed by fluid vaporization is generally referred to as fulguration and is well known.

Your patent, sir, is describing sparking followed by fluid vaporization; correct?

A. Yes. Similarly, I could play with the words and say when the device was placed into the field, as he says here, the sparking emits. But it's clearly indicated in the context that the device was actuated. It is also clearly indicated that you cannot get sparking in a fluid medium, because there is nothing to spark across. So it has to be heated.

Q. Thank you. The thing is, I don't want to play with the words. I am asking you that the words in your patent, which has been asserted as prior art, shows in sequence

Page 908

sparking followed by the vaporization. Is that true?

A. Yes. And I want to be clear that the concept of fulguration is a very well-known old phenomenon, which means that sparking must jump from an electrode across to another surface. And it implies that that order is well known.

Q. Now, you had mentioned on your direct examination that you are being compensated in connection with your work on this matter?

A. Yes.

Q. Smith & Nephew is the one that is paying you?

A. Yes.

Q. That is at the rate of $450 an hour; is that right?

A. Yes.

Q. Now, have you worked with a man by the name of Dr. Taylor in this case?

A. I have not worked with him. I have met him.

Q. In connection with the preparation of your expert report in this matter, did you consult with him?

A. No.

Q. Did you work with him?

A. No.

Q. Did you two exchange drafts?

A. No.

Q. The two of you worked independently. That true?

Page 909

A. That's correct.

Q. I would like to show you what was marked as DTX-424. I apologize, sir. I don't believe that's going to be in your binder.

DTX-424 appears to be a copy of the report that you prepared; is that right?

A. This is correct.

Q. I would like to ask you about a portion of this report, and specifically, on the fourth page, there is a book labeled Claim 13 of the '882 patent.

Do you see that?

A. Yes.

Q. And this was language that you prepared in connection with this case?

A. I explained my interpretations. Mr. MacFerrin prepared this document. I reviewed and agreed that it was consistent with. So, yes, that's reasonable to state that.

Q. So Mr. MacFerrin, Smith & Nephew's lawyers, prepared this document, you reviewed it and then signed it after comment with him?

A. Yes, again emphasizing, I explained my opinion. He put it in paper. I reviewed it and affirmed that it was consistent with.

MR. BOBROW: I would like to put up Claim 13 of Page 4 of DTX-424.

Page 910

MR. BOBROW: If you could highlight that, please...

BY MR. BOBROW:

Q. And for Claim 13, this relates to the UV photon issue; correct?

A. Yes.

Q. And you state that the '138 patent specifically mentions sparking during operation. Then you cite to Column 6, Lines 50 to 63; is that right?

A. Yes.

Q. Then you say, the spark results in the emission of UV and other wavelengths of light; correct?

A. Yes.

Q. And you signed this report; right?

A. Yes.

Q. With that language?

A. Yes.

MR. BOBROW: Your Honor, may I approach?

THE COURT: Yes.

BY MR. BOBROW:

Q. I would like to show you now DTX-400. DTX-400 is called Expert Report, Kenneth D. Taylor. Have you ever seen DTX-400 before?

A. No.

Q. This is the first time?

Page 911

A. Yes.
Q. If you could, please, turn in that document to the section on Claim 13. And specifically on Page 62.
MR. MacFERRIN: Your Honor, I object. This exhibit has not been admitted into evidence.
THE COURT: I don't want the whole exhibit admitted into evidence. It is impeachment. I am not exactly sure where we are headed. Since it's lunchtime, we will talk about it in a moment.
Members of the jury, I will remind you during your lunch break you are not to discuss the case among yourselves or with anyone else.
(At this point the jury then left the courtroom, and the following occurred without the presence of the jury.)
THE COURT: Sir, you may step down.
(Witness steps down from stand.)
MR. BOBROW: Your Honor, perhaps an instruction should be given to the witness, in case he is unfamiliar with the rules of our discussions.
THE COURT: All right. Hopefully the instruction doesn't have to be given. I will remind counsel for the defendant that he is not to discuss substantively the witness' testimony, since he is on cross. But you may go ahead and start your lunch break, since it will not be

Page 912

very quick.
With respect to this, of course, anything can be used to impeach an expert, even a rock. Generally, it's real difficult because I generally don't allow documents to be shown to a jury that haven't been admitted. But I certainly don't want to admit expert reports.
So the question is whether any of this should be shown to the jury as opposed to your directing the examination without the illustration. That's basically the objection at this point?
MR. MacFERRIN: It is, your Honor.
MR. BOBROW: Your Honor, I think it is fair for the jury to see side by side the language that these two experts put together independently, they will testify that it's the same language. I think I am entitled to impeach on that basis.
THE COURT: Don't use that word.
MR. MacFERRIN: Your Honor, if I may respond. These exhibits are never going to come into evidence. They are expert reports. Earlier, a 510-K was used for impeachment. And that was not permitted to be shown to the jury.
THE COURT: That's true. So we have to play by the same rules.
All right. Despite the fact we let you put

Page 913

the one up, we are not going to put either that up or the other one up.
Thank you, counsel.
(Luncheon recess taken.)
\- - -
AFTERNOON SESSION

(Proceedings resumed at 1:30 p.m.)

THE COURT: All right. Thank you. Anything before we bring the jury in?
All right.
(At this point the jury entered the courtroom and took their seats in the box.)
THE COURT: All right. Mr. Bobrow.
MR. BOBROW: Thank you, your Honor.
BY MR. BOBROW:
Q. Good afternoon, Dr. Manwaring.
A. Good afternoon.
Q. Before the break, I was asking you about Claim 13 of the '882 patent, your report on the subject and Dr. Taylor's report on the subject.
Are you with me so far?
A. Yes.
Q. Now, do you still have your report in front of you?

Page 914

A. On Page 62?
Q. Your report, which is DTX-424, Page 4.
A. Yes, I do.
Q. And when you were commenting in your report on the '138 patent and its relationship to Claim 13, you wrote, quote, The '138 patent specifically mentions sparking during operation, period. Column 6, Lines 50-63, period. The spark results in the emission of UV and other wavelengths of light; correct?
A. Yes, mm-hmm.
Q. Now, if you can turn, please, to DTX-400.
And this is Dr. Taylor's report; correct?
A. Yes.
Q. This is the report that you have never seen before; right?
A. That's correct.
Q. And turn to Page 62, please.
A. I'm there.
Q. And you see in the middle of the page, there is a discussion about Claim 13. Do you see that?
A. Yes.
Q. And this is about the '882 patent; right?
A. That, I don't know, but it surely looks familiar.
Q. Yes. And you will see that in Dr. Taylor's report it is written, quote, Manwaring '138 specifically mentions

Page 915

sparking during operation, period. Column 6, Lines 50-63 period. The spark results in the emission of UV and other wavelengths of light.
Do you see what I'm referring to there?
A. Yes, I do.
Q. The language in your report and the language in Dr. Taylor's report is identical, even down to the punctuation?
A. Okay.
Q. Except Dr. Taylor says Manwaring '138 and you say the '138 patent; correct?
A. Okay.
Q. Is that true?
A. Yes, it looks like it to me.
Q. Now, take a look, please, if you would, at Page 5, running over to 6 of your report. This deals with Claim 54 of the '882 patent.
Do you have that, sir?
A. I do.
Q. And you will see there that in discussing Claim 54 of ArthroCare '882 patent you wrote, quote, The '138 patent discloses a evacuating fluid generated at the target site using a suction lumen with a distal end adjacent the electrode terminal, period. Column 7, Lines 26 to 31?
A. Yes.

Page 916

Q. That's in your report; right?
A. Yes.
Q. Now, take a look at Dr. Taylor's report. And if you could turn to Page 81...
And at the top of the page, there is a discussion of Claim 54. Do you see that?
A. Yes, I do.
Q. And there is a reference there to the Manwaring '138 patent. Do you see that as well?
A. I do.
Q. And in discussing Claim 54, Dr. Taylor's report states, quote, Manwaring '138 discloses a evacuating fluid generated at the target site, using a suction lumen with a distal end adjacent the electrode terminal, period. Column 7, Lines 26 to 31.
Do you see what I'm referring to?
A. Yes, I do.
Q. And that language is word for word, coma for coma, the same words as what is your report except you say the '138 patent and he says the Manwaring '138 patent; right?
A. Looks like that.
Q. Okay.
MR. BOBROW: Thank you, sir.

Page 917

REDIRECT EXAMINATION

BY MR. MacFERRIN:
Q. Dr. Manwaring, I'll try to speak louder this time.
Do you have any education or training in physics?
A. Yes.
Q. How about electrical engineering?
A. Yes.
Q. Did you take courses in college on those subjects?
A. Yes.
Q. In that college course on physics, did you cover the experiment that you described that Newton had before him?
A. Yes.
Q. Is that basic physics?
A. Yes.
Q. Do you use physics and electrical engineering principles in your research?
A. Routinely.
Q. Now, when you signed your report, why didn't you test for UV protons?
A. For the very simple reason that I hadn't been asked to. I was given a charge to review and render an opinion and I became very curious about whether there was

Page 918

something unique about their instrument, and the more I read into how the spark was being made and could see the pictures of documents, I concluded that is identical to how I do it, and so I have been provoked to look at that further since our discussions.
Q. Well, before we --
MR. BOBROW: Your Honor?
BY MR. MacFERRIN:
Q. So was there no need or did you feel there was any need for to you do any testing?
A. No, nothing was brought to my attention.
MR. MacFERRIN: Now, your Honor, I believe Dr. Manwaring was asked about tests on cross-examination. I believe that opened the door to the other matter that was excluded.
THE COURT: No, it did not.
MR. MacFERRIN: Okay.
BY MR. MacFERRIN:
Q. Now, turning to the discussion of the Taylor report, where he says that the spark results in UV protons, the spark in your patent, does it surprise you that he agrees with you?
A. Well, I would be surprised if he didn't. If someone is skilled in the art of RF, I think if you looked at the mechanism of how the energy was being passed through a

Page 919

salt-laden water, I would be surprised if it isn't identical among all these devices that are used in that environment.

MR. MacFERRIN: Could I please have JTX-2?

BY MR. MacFERRIN:

Q. Could you please turn to JTX-2 in your binder, Dr. Manwaring, in the last page?

MR. MacFERRIN: And could I have that up on the screen?

BY MR. MacFERRIN:

Q. What does this show?

A. This document is a certificate of correction that refers to Claim No. 1 of the Eggers patent. And being a certificate of correction, it demonstrates that a change has been made and approved in the language of the first claim.

Q. I'd like to ask you, Dr. Manwaring, you were asked about the rate of saline in your patent. Does this claim say anything about the rate of saline delivery?

A. No.

- - -

Page 920

Q. Does the rate of saline delivery have anything to do with the validity of this claim?

A. No, not whatsoever.

Q. If I could ask you to turn now to your patent, DTX-46...

MR. MacFERRIN: If I can have that up on the screen, please...

BY MR. MacFERRIN:

Q. I would like to ask you in particular to direct your attention Column 7, Lines 26 to 31. I believe you were asked about this on cross-examination. Do you see that there?

A. Yes, I do.

Q. Now, the fluid that is, does it say the negative pressure will drop fluid up into the tube?

A. Yes.

Q. Would that remove that fluid from the target site?

A. No. It's important to emphasize that the fluid must always be present at the active electrode.

Q. Would there be some fluid that was removed from the target site?

A. Yes. Fluid would always be there, and the evacuation, whether it is sucking, essentially pulls fluid which is salt laden, electrically conductive, by the electrode.

Page 921

That's the principle.

Q. Do you consider that evacuation?

A. Yes.

Q. Now, the fluid that is evacuated, would that include fluid that was generated at the target site?

A. It can.

Q. What kind of fluid would that include?

A. Well, heating in the presence of biologic tissue. Let's say one is ablating, which means removing, tumor tissue in the brain. That tissue is vaporized. And in that vaporization is fluid in the form of gas, which quickly mingles with the spinal fluid or the irrigated normal saline. So it's a mix again.

Q. Could you now turn, please, to Column 6, Lines 50 to 63?

MR. MacFERRIN: Chris, if you could pull that up for me, I would appreciate it.

BY MR. MacFERRIN:

Q. Now, are you referring to fulguration in this passage?

A. That's correct. Maybe I could define fulguration, because I know it's an unusual term.

Q. I would appreciate it if you would explain to the jury what the sequence of events in fulguration is?

A. Yes. In surgery, when we use electrosurgery, we

Page 922

can cut, we can coagulate or desiccate, or we can fulgurate. That is essentially all we can do. When we cut, we use one waveform and one voltage that incises tissue and it has some heating effect, but it doesn't really impart good sealing of blood vessels. So the blood vessels can bleed, just like if you cut with a cold blade. It's a little better than that.

When we contact desiccate, we have tied that electrode right to the face of the tissue and it drives current through the tissue. And as it goes by, it drives the moisture out of the cells, and it seals blood vessels. So we call it coagulation or desiccation, depending on what technique we want.

On the other hand, fulguration, which is the subject of my patent, is to have an electrode stand off the surface of tissue and spark down to it. That sparking is very high voltage, to get that effect. You can't do it with low voltage or cutting. It has to be high. Typically a thousand volts would be used. And that spark comes down and hits the surface of the tissue and sears it, much like the searing you are familiar with in cooking. And that preserves the tissue beneath, keeps it viable, but stops surface bleeding.

In this device, when we work in spinal fluid or normal saline, fulguration refers to the sparking effect.

You don't see sparking in contact desiccation. And with a magnifier, you might see it with cutting, but fulguration is truly what makes visible spark to your eye. And that sparking is passing across the steam barrier into the saline, or as you get closer to tissue. And that's what's having the therapeutic effect.

So it must have spark, it must have high voltage, it must have a gap and it must have non-contact.

Q. What happens first, the arc or the steam barrier?

A. The -- I will back up and explain this way. Electricity passing through saline starts it to heat. The heat turns into vapor. Now a spark can jump across.

Q. So, did you say you have vaporization before you have a spark?

A. That's correct.

Q. Do you continue to have vaporization after the spark?

A. Well, the vapor collapses into the tissue. As soon as the heat goes away, it's not sustained. Just like boiling on a pot. People are familiar with that. The bundle is a steam barrier.

Q. You were also asked about the fact that your device is monopolar?

A. Yes.

Q. Does that matter to the validity of these claims of the '882 patent?

A. No, not in my judgment.

Q. Do you recall Mr. Eggers saying that that did not -- that his claim included monopolar devices?

A. That's right.

Q. Does that confirm your opinion, the fact that your device is monopolar doesn't matter to the validity?

A. Yes, I know my device works in a bipolar mode, I know my device works in a monopolar mode. I think that is transparent to this issue of fulguration.

Q. You were also asked about your rate. Is that your usual rate?

A. No. In fact, most of the time, as you might imagine, I testify on issues of medical injury, like non-accidental trauma, shaken baby, very commonly neurosurgeons testify typically at about $500 an hour if they were involved as expert witnesses.

Q. Why are you charging less than your usual rate?

A. Well, I have a particular interest. I am quite curious, because my patent has been cited as prior art.

MR. MacFERRIN: Thank you, Dr. Manwaring.

THE COURT: All right. Thank you very much, sir.

(Witness excused)

- - -

MS. BOYD: Our next witness making his way into the courtroom now is Warren Heim. He was mentioned in Mr. Sparks' testimony. He is a mechanical engineer who specializes in medical devices. He was engaged by Smith & Nephew as a consultant in the development of the Control RF product. He is going to testify about that development, as well as some analysis that he did of the '882 patent early in that development process. The '882 patent is the one we have also called the multiple-electrode patent.

- - -

... WARREN P. HEIM, having been duly sworn as a witness, was examined and testified as follows ...

DIRECT EXAMINATION

BY MS. BOYD:

Q. Can you please introduce yourself to the jury and tell them a little about yourself?

A. Certainly. My name is Warren Heim. I live in Boulder, Colorado. I live there with my wife. W have been married for 23 years. We have four sons.

Q. That's quite a house you must have?

A. It is a busy one.

Q. What do you do for a living?

A. My wife and I own a small medical device research and development company. The name of the company is Team Medical. Team Medical develops new medical device technology based on our internal R&D efforts, patents the technology, and then licenses that technology to premium quality medical device companies.

Q. Does Team Medical actually sell medical devices?

A. Team Medical does not manufacture nor sell products of its own. We are an R&D company. We have laboratories and analytical skills that we use to develop our technology that we then patent.

Q. Can you describe for the jury your educational background, starting with college, please?

A. I attended Dartmouth College. Dartmouth is in Hanover, New Hampshire. I was at Dartmouth for six years and I received three degrees from the institution. In 1973, I graduated with an AB, that is a Bachelor's of Arts degree, it was a liberal arts degree. I then went a fifth year, and graduated with a Bachelor of Engineerihg degree. I then was there another year, and graduated with a Master's of Engineering degree. The specialty was mechanical engineering.

Q. Can you describe what work you did immediately after graduating with your Master's degree in engineering?

A. When I graduated in 1975, I initially worked in the energy and environmental field. In particular, I worked on various projects associated with converting coal and